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ABSTRACT

This two-volume report analyzes the hiring requirements for paramedical personnel at the Cambridge Hospital, with recommendations for improved manpower utilization. This appendix to the final report contains definitions and analyses of the tasks and functions performed by the paramedical personnel who were interviewed. Volume I is available as VT 014 989. (BH)

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RESTRUCTURING PARAMEDICAL OCCUPATIONS

FINAL REPORT

By HAROLD M. GOLDSTEIN and MORRIS A. HOROWITZ

Sally M. Lapan, Research Assistant

Volume II

A Report To The

OFFICE OF RESEARCH AND DEVELOPMENT
MANPOWER ADMINISTRATION
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APPENDIX C

Definitions of Tasks and Functions
for Selected Occupations
at Cambridge Hospital

GENERAL NURSING SERVICE

REGISTERED NURSE, LICENSED PRACTICAL NURSE, NURSES' AIDE, ORDERLY

1. Straightening up and cleaning the following:

   a. Patient's immediate furniture

   The performer wet wipes the bedside table and the overbed table top and arranges the articles neatly on top, so that the patient can easily reach them.

   b. Nurses station

   The performer wet wipes the nurses station daily and arranges the articles on the station in a manner which permits easy accessibility to the tools of communication.

   c. Utility rooms

   The performer wet wipes the areas and makes certain that all unnecessary equipment is removed to its proper place. All soiled equipment is washed with soap and water and returned to Central Supply for sterilization. All trash is emptied down the chute, and the stock supplies are replaced from the main storage areas.

   d. Treatment rooms

   All used and soiled equipment is removed to the utility room. The treatment table paper is replaced, and all used stock solutions and supplies are replaced from the main storage area.

e. Nourishment center

The performer removes any food trays left in the nourishment center and returns them to the main kitchen. The area is wet wiped and the trash container, emptied into the utility room receptacle.

f. Litters.

The performer wet wipes all the litters on the nursing unit after use, with aqueous Zephiran. The litter is then made with fresh linen and placed in the litter area on the nursing unit.

2. Distributing mail and flowers.

When mail or flowers are received for a patient, the performer takes them to the patient's bedside.

a. Mail should be opened and read to the patient, if necessary, and the patient should be asked where he would like the card placed.

b. Flowers: the card should be opened and handed to, or read to, the patient. Flowers should be placed where the patient can see them, but where they will not be in the way; water should be added when necessary.

3. Doing departmental errands:

a. Going to pick up orthopedic equipment

If special equipment is needed and the Orthopedic Department is unable to deliver the equipment, the performer will find it clearly labeled in the Orthopedic Department on the first floor of Cahill House. Additional equipment is stored in the orthopedic storeroom on the second floor of Cahill House outside of Central Supply.

b. Going to Central Supply or laundry

The performer receives a yellow requisition slip signed by the nurse on the nursing unit which specifies the necessary equipment. Central Supply is presently located on the second floor of Cahill House. After 7 p.m. Monday thru Friday and after 5 p.m. Saturday and Sunday, the nursing supervisor will meet the performer in Central Supply and obtain the necessary equipment for the performer.

Laundry: If the laundry is unable to deliver needed linen, the nursing supervisor will release the laundry key to the performer; the laundry is located in the basement of the new building.

c. Going to IBM or records office

IBM: In discharging a patient, the performer and the patient go to the IBM office, located on the second floor, west wing, room 217 of the new building, to submit the patient's clothes slip and to receive the patient's valuables and hospital bill. The IBM office is open 8:30-5 p.m. Monday through Friday.

Records office: When a patient is admitted, his old record (if there is one) is obtained from the records office. On discharge, a patient's old records are returned to the records office. Located on the second floor of Cahill House, the records office is open from 7 a.m.-11 p.m. seven days a week. From 11 p.m.-7 a.m. the clerk in the emergency room is responsible for obtaining records from this office.

d. Going to the operating room to help bring back a patient.

If the patient is a septic case (unclean or infectious), he will return to the nursing unit under full anesthesia. The performer reports to the charge nurse in the Operating Room and states why he is there, giving the patient's name. If the patient is under full anesthesia, an anesthesiologist will also accompany the patient back to the nursing unit. The performer takes the foot end of the stretcher and assists the doctor by pulling the stretcher while the doctor pushes the head of the stretcher (this allows the doctor to be near the patient's head in the event of an emergency). The performer holds his arm over the electric eye of the elevator while the doctor backs into the elevator with the patient's head at the back of the elevator. The procedure is repeated while the patient is being removed from the elevator. If the patient is not a septic case, the performer finds the patient in the Recovery Room. To enter the Recovery Room, the performer must pass over the conductive carpeting. At all times either an RN, LPN or doctor must accompany a fresh post-operative patient back to the nursing unit. If none of the above is available, the supervisor can be readily reached by the charge nurse, via a bell-boy. The procedure for moving the patient is the same as that for a septic case.

4. Doing errands for patient:

   a. Making phone calls

   The performer can make phone calls for patients who are unable to go to the phone themselves. Examples: patients in traction, patients with heart conditions, fresh post-operative patients. Depending on the nature of the call, the performer should check its advisability with the charge nurse on the nursing unit. Patients who are able to make phone calls themselves are instructed to use the pay phone.

   b. Refilling water jugs

   The performer takes the water jug to the nourishment center*, rinses the jug with cold water, then adds ice from the dispenser and water from the faucet, wipes the outside of the jug with a paper towel, returns the jug to the patient's bedside, and places it within easy reach of the patient.

*Note: Before refilling the water jug, the performer should check with the charge nurse to see if the patient can have more water. Some patients cannot have ice water, some surgical patients are restricted temporarily to any fluid intake orally, and others are restricted as to their total volume of oral fluid intake.

c. Preparing snacks or drinks from nourishment station

The performer must check with the charge nurse to see if the patient can have any snacks or drinks. If the patient can, the performer goes to the nourishment stand and prepares the snack. It should be served simply, but attractively, since appearance of food is a factor in the patient's recovery.

d. Getting an extra pillow.

The performer would go to the linen cart in the utility room. If there were no pillows there, the performer could remove one from an unoccupied bed or order one from the main laundry room. Note: Judgment should be used as to why the patient desires an extra pillow. Examples: an asthmatic needs 3-4 pillows to aid in breathing. A surgical patient may not be allowed a pillow, due to anesthesia precautions.

5. a. Giving and removing bedpans

Bedpans are found in the patient's bedside table. Some patients can get themselves on and off the bedpan, provided it is handed to them. The performer should raise the head of the bed slightly to make it easier for the patient to lift himself onto the pan.

When the patient is on the bedpan and his privacy has been insured by pulling the curtains around the bed, the performer makes sure the patient has his call signal and toilet tissue handy. When the patient is finished, the performer flushes the bedpan with the bedpan flusher in the patient's bathroom and returns it to the bedside table. The performer then offers the patient a face cloth and a towel to wash his hands.

b. Assisting patient to use bedpan or urinal

Most patients who need to use a bedpan will need some form of assistance. Some will need to be rolled to one side and then turned back onto the bedpan. Others will be able to flex their knees and lift their buttocks off the bed but will need assistance in achieving the height to which their buttocks should be elevated. The performer places the palm of one hand at the small of the patient's back and supports the patient there while sliding the bedpan underneath the patient. When the bedpan is removed, the same procedure is followed in reverse, keeping the toilet paper in the free hand. Some patients cannot use the urinal by themselves. If the patient is in bed, the urinal can be propped with a towel. The towel can be removed and placed in the bedside table for future use, once the patient has used the urinal.

c. Helping patient to and from bathroom.

The performer would escort the patient to the bathroom and help untie his bathrobe and pajama bottoms as necessary. The patient should be seated on the toilet with the emergency call cord within reach. The performer should step outside the bathroom and tell the patient that he will be on the other side of the door. When the patient finishes, the performer asks the patient if he is able to use the toilet paper by himself or if he needs assistance. The patient is then assisted back to bed or to a chair, and the performer brings a wet face cloth and towel so that the patient may wash his hands.

6. Making beds:

a. Unoccupied

The performer gets two large sheets, 1 drawsheet, 1 spread, a pillow case, a clean bedgown, a face cloth and a towel from the laundry cart in the utility room. He places the clean linen on a chair near the unoccupied bed. The performer then opens the folded large sheet lengthwise and, while it is still folded in quarters, places it on the edge of the bed and drops one of the edge quarters down. The sheet is tucked in at the head of the bed (halfway across). A mitered corner is made at the head of the bed, and the sheet is tucked in along one side. The draw sheet is then opened the same way with the lengthwise portion going across the center of the bed. A quarter of this sheet is tucked in. The second large sheet is then placed on the same side in the same way as the first large sheet, this time starting from the head of the bed and tucked in at the foot of the bed. The spread is placed over the top of the second sheet in identical fashion and tucked in at the bottom. The performer goes to the other side of the bed and reaches under to the bottom sheet. The performer then brings the fan-folded edge to his side of the bed, tucking in the top, making a mitered corner and snugly tucking in the sides. He then brings the drawsheet over and firmly tucks it in lengthwise across the center. The same procedure is followed with the second large sheet and the spread, as with the bottom sheet. The spread is smoothed and the sheets snugly pulled. The pillow case is put on, and the pillow is placed on the bed with the open end away from the door to the room. The clean bedgown, towel and face cloth are placed in the bedside table.

b. Occupied

The same linen is needed and obtained from the laundry cart in the utility room. If the top sheet is not soiled, it can be used as the bottom sheet. The patient is asked to roll over to one side of the bed as far as he can go without falling. If there is a chance of the patient falling, the side rails should be raised. The bottom sheet and the drawsheet are untucked and rolled clockwise, lengthwise to the center of the bed. The used top sheet is placed on the bottom and, after tucking in one side, the free side is rolled loosely in a counter-clockwise manner to the center of the bed. The draw sheet is placed across the bed in the center; one side is tucked in and the loose end rolled counter-clockwise to the center of the bed. The top sheet and spread are added in the same manner as above. After this is completed, the patient is asked to roll over a little bit more and the rolled sheets in the center are pushed under the patient's hips and shoulder. The side rail is put up, and the performer goes to the opposite side of the bed. The patient is then asked to roll over the lump of linen in the center of the bed. The first side rail is lowered and the performer removes the soiled bottom sheet and drawsheet and places them on an empty chair nearby. The bottom sheet is pulled through and tucked in, as are the drawsheet, the top sheet and the spread. The spread is fan-folded about 12 inches at the top, and the top sheet is folded over. The pillow case is changed with the opening away from the door. The second side rail is lowered. The bedgown, face cloth and towel are returned to the bedside table. The soiled linen is taken to the laundry hamper in the utility room.

c. Post-operative.

After a patient goes to surgery, the performer strips his bed but saves the top sheet, if it is not soiled. Two bath blankets, a large sheet, a spread and a pillow case are obtained from the laundry cart. The bottom sheet is tucked in, as described above. One bath blanket is placed directly over this and tucked in on all three sides. The performer next adds a second bath blanket, leaving all flaps untucked. The top sheet and spread are placed over this in the above manner but are not tucked in. The loose ends at the bottom are folded backwards at the edge of the bottom of the mattress. At the head of the mattress, the spread is back-folded about 10 inches and the top sheet folded back over it. At the side of the bed closest to the door of the room, both folded ends are pulled up and brought to the center, forming a "V." The "V" is then folded backwards several times to the center of the bed. The pillow is placed standing up against the head of the bed. The soiled linen is removed to the laundry hamper in the utility room.

7. Answering patient calls.

The performer uses the intercom, located at the nurses' station, to determine the nature of the patient's question. If the performer can take care of the matter, she does; otherwise she refers the question to the appropriate person. Then the performer turns off the patient's call light.

8. Admitting patient:

   a. Completing clothes list or valuables list

The performer obtains a clothes slip list and valuables envelope from the chart holder in the nurses' station. The performer introduces himself to the patient and asks him to get into sleepwear he has brought with him, explaining the procedure for listing his clothes. After the patient has changed, the performer returns and makes an accurate list of the clothing with identifying descriptions, e.g., brown coat with purple-colored buttons. The quantity of each article is noted, e.g., two bathrobes. In terms of valuables, the patient is encouraged to have no more than two dollars in change with him, and to have all expensive and sentimental jewelry taken home or removed to the hospital safe. Rings are described but not evaluated in worth, e.g., a yellow metal ring with a white stone; wedding bands are described in terms of white metal or yellow metal. Preferably, the patient's family will take valuables home immediately. However, there is a hospital safe for valuables. Money is counted and listed on the valuables envelope and on the clothes slip in terms of the number of each identical item:

3	$10.00 bills =	$30.00
2	5.00 bills =	10.00
	Total	$40.00

This list must be signed by the performer and witnessed by another performer and, if possible, the patient. This valuables envelope and the clothes slip are then taken to the IBM office to be marked by that department. The clothes slip is signed in three places by the patient and witnessed by the performer. All medications must be sent home with the patient's family or taken to the IBM office. No drugs may be left with the patient.

b. Getting patient comfortably settled in bed

On admission the patient should be introduced to the other patients in his room, if any, and should be informed of a few facts about the nursing unit, such as the name of the head nurse, the name of the doctor who will be examining him, where the bathroom is, the hospital policy concerning visiting hours and the policies concerning television sets and radios. The patient should be asked how he feels about being admitted and if he has any questions about the nursing unit. The control panel should be explained to him, in the event that he should need anything. The patient should then be left alone to say farewell to his family until the doctor arrives.

c. Notifying intern.

The performer pages the intern and tells him the name of the patient, the admitting diagnosis, the name of the private doctor, if any, and whether the admission was an elective or an emergency.

The above procedures will vary depending on whether the patient was an elective admission or an emergency, whether or not the patient can communicate, whether he has a family or not, and the particular time of the day. Most elective cases will be in before 3 p.m., whereas an emergency can arrive any time of the day or night.

9. Discharging patient:

   a. Returning clothes and valuables

   The performer removes the clothes slip from the chart and takes it to the patient's bedside. The patient and the performer check the items listed to make sure all are accounted for. The patient then signs in the appropriate place at the bottom of the clothes slip, indicating that all his clothes have been received.

   b. Accompanying patient from floor

   The performer then takes the patient, with his clothes, by wheelchair to the IBM office. The clothes slip is presented to the cashier, the valuables are returned to the patient, and the clothes slip is marked again by the IBM office. The patient is then given a copy of his hospital bill to date, before it has been submitted to insurance claims. The performer then escorts the patient to the first floor of the main building where his family's car or a taxi is waiting to take him home.

   Again, the procedure will vary depending on the condition of the patient, i.e., he may not have a family to pick him up, he may have to go home by taxi, or he may live on the fourth floor walk-up and have to go home by ambulance. These things are known before discharge and can be planned for accordingly.

10. Locating and setting up simple equipment:

   a. Bed rails

   The performer finds bedrails on every bed in the hospital. The performer simply pulls them up (they lock in place). To release them, the performer presses a button on each end of the side rail, pulls out, and the side rail unlocks.

b. Footboards

The performer will find footboards in the utility room of the nursing unit. The board is taken to the patient's bedside; the bottom of the mattress is lifted up, and the footboard is slid underneath. The footboard must be covered with several drawsheets or a bath blanket to prevent the patient from getting splinters in his feet. If there are no more footboards in the utility room, the performer can borrow one from another nursing unit or call the orthopedic department and ask them to bring one to the nursing unit.

c. Sandbags

The performer obtains sandbags from the utility room or from the orthopedic department. They should be covered with a towel or a pillow case. They are quite soiled on the outside, and the cover prevents the patient from getting an unnecessary infection.

d. Heel coverlets.

Heel coverlets are obtained from the treatment room; if they are not there, they can be obtained from Central Supply. They fit over the heel like slippers and should be marked by magic marker with the patient's name and room number. The performer makes out a patient charge slip for each pair of heel coverlets.

11. a. Taking patient to X-ray:

1. Walking with him

Unless the patient violently objects to a wheelchair, he should not be walked to the X-ray department. However, if the patient does object, the performer should check with the charge nurse to see if the X-ray requisition has gone down to the X-ray department or if it is still on the nursing unit. If it is still on the unit, the performer should take it with the patient when he ambulates the patient to the X-ray department, which is on the first floor of the new building. He should seat the patient in the patient waiting room and then take the X-ray requisition to the secretary's desk to have the patient logged-in. The secretary will then give the performer an idea of how long a wait there will be. The performer relays this information to the patient and tells him that he will return to pick him up when the X ray is finished.

2. By wheelchair

The patient is helped into the wheelchair, and a draw sheet is folded in half and placed over the patient's lap. If the patient is elderly, it is a good idea to take a bath blanket along, as the X-ray department can be drafty. The patient is then wheeled to the X-ray department, where the same procedure as in #1 is followed.

3. By litter

Depending on the age and condition of the patient and the type of X ray, the patient may have to go to the X-ray department by litter. Examples: patients with heart conditions and patients with wire sutures, who find it too uncomfortable to sit for any length of time. Litters are available on the nursing units in the stretcher area provided for this purpose. There should be two performers, if possible, to assist in moving a patient onto a litter. The bed should be raised to the same level as the litter. The performer should bring a drawsheet (from the laundry cart in the utility room) to the bedside. The patient's privacy should be maintained during the transfer from bed to litter. The litter should be placed directly alongside the bed, making sure the wheels on the litter are locked; and the patient should be asked to slide over onto the litter. The second performer should be on the opposite side of the bed, preventing the bed from rolling or being shifted suddenly by the weight of the patient. IV bottles, urinary drainage bags and pillows must be moved along with the patient. The draw sheet and, if necessary, a blanket are placed over the patient; and the side rails on the litter are raised. The patient is asked to cross his arms over his chest to avoid hitting his arms on doorways. A male performer can usually manipulate a litter alone. He takes the patient to the elevators, manipulating the stretcher from the head while pushing the stretcher. He backs into the elevator with the head of the litter at the back of the elevator. The same procedure as in #1 is followed once the patient is in the X-ray department. Note: Some patients, because of the severity of their conditions, need to have a nurse accompany them; some because of anxiety, need to have an aide accompany them.

b. Taking lab specimens to the lab.

The performer must make sure that the specimens are properly labeled with the patient's full name, unit number, nursing unit and the date. The accompanying requisition should be stamped with the patient's addressograph plate; the type of specimen submitted and the desired test should be noted. The specimen and the requisition are then taken to the lab on the third floor of the new building. The requisition must be stamped at the time clock on the desk at the lab entrance; the specimen should then be placed in the refrigerator marked "for specimens only." If the test required is STAT (emergency), the performer should immediately give the specimen and the stamped requisition to the technician.

12. Assisting in moving patient to another floor.

The performer should notify the admitting office that the patient is being transferred to another unit. The unit should also be notified so that a convenient time for the transfer can be arranged. The patient's name, condition and reason for transfer are given at this time. The patient's clothes slip is removed from the chart and his closet checked to make sure all admission belongings are still intact. The items are checked carefully, collected and put into a suitcase or a large paper bag. The bedside table is emptied and all disposable items charged to the patient are put together to be sent with him. Depending on the condition of the patient and the reason for transfer, he is transferred either by wheelchair or by litter to the other nursing unit; his chart and personal belongings are taken with him. The other unit is called once again just before the patient leaves; the nurse gives a verbal medical report to the receiving nurse on the other nursing unit. While this is going on, the performer takes the patient to his new room and makes him as comfortable as possible, before returning to the original nursing unit.

13. Measuring food and fluid intake and output and totaling at the end of each shift:

    a. Urine jugs

    The Intake and Output sheet, clipped to a board at the foot of the patient's bed, is used to keep a record of the fluid intake and output of a particular patient. The patient, if coherent and capable of understanding, is told how to help the performer keep track of the amount of fluid intake and output; whenever he drinks a glass of water or other fluid, he must write this down on a piece of scrap paper so that the performer can transpose it to the I&O record. When the patient goes to the bathroom, he is instructed to use a bedpan or urinal so that the performer may measure and record the amount on the I&O sheet. The urinary drainage bags have calibrated markings on the outside so that they can be measured; afterwards, the contents may be disposed of. However, as a double check, the performer should obtain a metal 1-quart calibrated container from the utility room and should drain the patient's drainage bag into the metal measurer. The metal measurer is much more accurate than the drainage bags are (heat expands plastic; and depending on the heat of the urine or the heat of the room, the bag may expand). After the urine has been checked for color, odor, sediment, etc., it can be emptied and flushed down the hopper. The amount should then be recorded on the I&O sheet, and the metal graduate should be washed with soap and water and returned to the utility room for its next use.

b. Tube drainage

Tube drainage is measured and recorded using the metal graduate as in (a).

c. IV intake.

The amount of IV fluid started is recorded on the I&O sheet when the bottle is started, under "amount of IV fluid started." At the end of the shift, the performer looks at the IV bottle and reads on the side of the bottle the amount of fluid that is left, subtracts this from the amount started, and records this figure on the I&O sheet under "amount of IV absorbed."

14. a. Checking food trays

The diet trays are brought in heated food trucks to the nursing units by the dietary department. When the performer receives the tray from the dietician, he checks to make sure that the patient gets exactly what is on his menu.

b. Delivering food trays

The performer brings the tray to the patient's bedside. The patient must be helped into a position from which he can easily reach his food. Some patients must be pulled up in bed, their milk carton opened for them, their coffee poured, their cereal made ready and the tray re-arranged so they can reach everything and help themselves. The performer must always take care not to make the patient think that he does not like doing this. If the patient sees that the performer is impatient, he will not want to eat the food.

c. Picking up food trays

The performer should casually ask the patient if he enjoyed his meal and, when permissable, if he would like any more. The performer should notice what and how much the patient ate and record all fluids on the I&O sheet, if applicable. The performer should note if the patient ate unusually poorly or unusually well, as this is an indication of regression or progress.

d. Feeding patients.

The performer brings the tray to the bedside and sets up the tray as if the patient were to feed himself. With some elderly patients it is advisable to put a towel across their chests as a bib. First, the performer should explain to the patient what she is going to do. Then she should ask the patient what he would like to eat first and the order in which he would like the food rotated; the performer should avoid imposing her own eating habits on the patient. The patient should not be hurried, and the food should be varied during the course of the meal.

15. Putting away the following:

    a. Supplies

    On the nursing units there is a place for everything and that place is usually marked or labeled. The performer places the equipment on the proper shelf in the proper room.

    b. Equipment

    The cabinets in the treatment room and the utility rooms are clearly marked and labeled. The performer places the equipment on the proper shelf in the proper room.

    c. Instruments.

    Instruments belong in either the treatment room or the utility room. The treatment room houses all equipment and supplies used for dressing changes and treatments. Some of the equipment in the treatment room needs to be re-autoclaved, and some is disposable. Most of the equipment in the utility rooms is disposable.

16. a. Washing or soaking used equipment and supplies

    Equipment is washed with soap and water in the utility room and then dried with paper towels, which are on the sink shelf in the utility room. In the case of equipment which has been contaminated with an infectious organism, the equipment is washed and soaked in Wescodyne and then placed in a wax paper bag, marked with the organism, and returned to Central Supply.

b. Putting them on the cart to be returned to Central Supply to be autoclaved.

Used and washed equipment is placed in a shopping basket in the utility room to be returned to Central Supply. Usually at 3 p.m. the basket is taken to Central Supply, and the equipment is re-wrapped and re-autoclaved there.

17. Caring for deceased persons:

a. Notifying appropriate persons

After the patient has been officially pronounced dead by the doctor and the doctor has notified the family, the performer makes out four "Critical Notification" cards. The performer then calls the switchboard operator and the Admitting Office and tells them that the patient has expired and that the family has been notified by the doctor. The "Critical Notification" cards are then distributed to the switchboard operator, the Admitting Office, the front desk, and the Nursing Office.

If the doctor should decide to tell the family only that the patient has taken a turn for the worse, the same procedure is followed except that the performer tells the Admitting Office and the telephone operator that the family has not yet been notified.

b. Washing and tying patient

The performer obtains a shroud kit from the nurses'station and takes it to the patient's room. The patient is bathed, his eyelids are closed, and the patient's dentures (if applicable) are placed in his mouth. The performer pads the anal and vaginal orifices, and applies a pad to support the patient's jaw. The wrists and ankles are padded and tied together with gauze strips. The performer fills out three tags with the name of the patient, the doctor, the hospital, and the date; one is tied to the patient's big toe, one to the shroud, and one to the patient's personal belongings.

c. Removing IV's, tubes, dressings

After the patient has been officially pronounced dead by the doctor, IV's are clamped and removed, old dressings are removed, and new dressings are taped securely to the body. Exception: if the patient is a Medical-Legal case, nothing can be clamped, shut off, taken out, or removed until the medical examiner has been called by the Admitting Office.

If the medical examiner chooses to come in and see the patient, the patient must not be touched; if he decides not to view the patient at that time, the body may be prepared. However, the performer must receive official notice from the Admitting Office.

d. Going to morgue to get litter

The performer goes to the seventh floor, locates the litter and brings it back to the patient's room.

e. Taking deceased person to morgue.

The performer obtains two draw sheets from the laundry cart in the utility room and covers the pad on the litter with one of them. Two performers then transfer the body to the litter, having moved the body as close to the edge of the bed as possible; one performer moves the patient's legs and feet, the other moves the patient's shoulders and back. The body is then covered with the second draw sheet and moved to the morgue. Patients must never be left face down.

Note: When the patient expires, the clothes slip is removed from the chart, and the clothes and valuables are gathered together for the family. All rings and earrings are removed from the body. If the family comes in, the valuables and clothes are given to them; and they in turn sign the clothes slip. If the family does not come in, the clothes are tagged and sent to the morgue; the valuables and clothes slip are sent to the IBM office. The disposition of all belongings must be noted on the clothes slip (i.e., "rings to IBM") and signed for by the performer.

18. Giving information or directions to patients or visitors or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.

The performer, depending on his position, may answer questions ranging from the patient's location to his condition. However, when in doubt, the performer should refer the patient or visitor to the charge nurse or doctor.

19. a. Collecting urine, stool or sputum specimens to be sent to lab

Urine specimen: The patient is asked to void in either the bedpan or urinal, which the performer then takes to the utility room. He obtains a urinalysis specimen container in the drawer marked "Lab Equipment," pours the urine into the container, and puts on a cover. He marks the tag with the date, patient's name, unit number and the nursing unit. The performer then rinses the bedpan or urinal with the bedpan flusher and returns it to the patient's bedside stand and leaves the urine container at the nurses' station.

Stool specimen: The performer instructs the patient to use the bedpan the next time he has a bowel movement and then to call the performer with his signal light. The performer takes the bedpan to the utility room and obtains a stool specimen container from the drawer marked "Lab Supplies" and two tongue depressors from a cabinet. With these, he removes the specimen from the bedpan and places it in the stool container. The performer marks the specimen with the patient's name, unit number, the date, and the nursing unit. The bedpan is flushed, dried and returned to the patient's bedside table.

Sputum specimen: The performer obtains a container for sputum specimens from the drawer market "Lab Supplies" in the utility room and explains to the patient that a sputum specimen is needed. The patient is then instructed to expectorate (spit) into the container, which the performer leaves at the bedside, when he (the patient) is able to. It may be necessary to suction the patient to obtain the specimen. When the specimen is obtained, it is marked appropriately and left at the nurses' station.

b. Performing routine tests:

1. Pre-meal glucose

One hour before meals, the performer instructs the patient to empty his bladder and then to drink a few glasses of water. About one half hour before mealtime, the patient is asked to void again in a paper cup which the performer has brought to him. The performer takes the urine sample to the utility room and obtains an eyedropper from the equipment marked "Pre-Meals" on the counter. He transfers five drops of urine from the paper cup to the glass test tube in the tray and then adds ten drops of water from the faucet. The performer next unscrews the cap from the bottle market "Clinitest Tablets" and shakes one of the tablets into the cap. The performer shakes the tablet from the cap into the test tube, which contains the water and urine. He waits a few seconds while the chemical reaction occurs, then compares the color of the liquid in the tube with the color chart on the wall in the utility room, and records the results in the Pre-Meal Book at the nurses' station.

2. Guiac

The performer asks the patient for a stool specimen (refer to 19a). The collected specimen is then taken to the utility room and the "Guiac" tray is obtained. Using tongue depressors, the performer takes a small piece of the stool specimen and places it on a piece of filter paper from the "Guiac" tray. The performer obtains a tablet from the bottle marked "Hemetest Tablets" and places it halfway on the specimen and halfway on the filter paper. The performer then takes the medicine dropper from the tray and puts two drops of water on the center of the pill. The chemical reaction is observed, and the results compared to the chart on the bottle and recorded.

3, 4, and 5. Albumen, pH, hematocrits: Should not be done by performers.

c. Obtaining a culture.

The performer obtains a swab from the treatment room. It must be kept clean until the drainage is ready. When everything is ready, the performer removes the swab from its container, without allowing it to touch anything, and swabs the appropriate area. Then she reinserts the swab into the container, without contaminating the swab. A charge slip is made out. Then the performer sees that the swab is taken to the lab immediately, before it dries up.

20. Giving routine morning care:

a. Assisting patient in bathing and dressing, brushing teeth.

The performer introduces himself to the patient and talks briefly with him to learn how the patient slept, how he feels today and so on. The performer then obtains the basin, emesis basin, face cloth, towel, soap, powder, back lotion and other assorted toilet articles from the bedside table. The head of the bed is usually raised, and the overbed table is adjusted for the patient's convenience. The performer helps the patient to untie his bedgown, fills the large basin with warm water and places the soap, face cloth and towel within easy reach of the patient. After the performer has asked the patient if he needs any more assistance, he closes the curtains and tells the patient to use the call light when he has bathed as much of himself as possible.

When the performer returns, the patient has probably washed everything but his back. The performer empties the basin, rinses the face cloth, refills the basin with warm water, and then washes the patient's back and any other areas that the patient has been unable to reach himself. All of the equipment used is then rinsed and dried as necessary and returned to the patient's bedside table.

Note: Assistance may range from that described above to the performer's giving a complete bed bath to a patient who is too ill to bathe himself.

b. Turning or positioning patient

In turning or positioning a patient, the performer should remember that he is doing something which the patient is unable to do for himself; if the patient cannot turn himself, chances are that he will not be able to tell the performer that he is in an uncomfortable position. Discomfort occurs at joints and bony prominences of the body, and patients should be turned and positioned as frequently as possible to keep pressure off these special areas. The performer should handle and move a patient by supporting these joints. For example, in turning a patient to his side, the performer should reach underneath the patient's shoulders, get hold of the opposite arm joint and gradually pull the patient toward him, thus turning him in the process. The patient's hips are pulled in the same direction and in the same manner. The patient's legs are positioned with one leg straight and the other flexed, and a pillow is placed between the legs to minimize the pressure of the two legs together.

c. Giving massages or alcohol rubs

The patient is asked to turn on his side, away from the performer, or on his abdomen, if possible. The performer pours a small amount of lotion into the palm of his hand and rubs his hands together. The performer starts the massage at the base of the spine and works gently but firmly from the sacral area upwards and outwards to the shoulder muscles, coming down the sides of the rib cage and back to the sacral area. This continuous motion relaxes the muscles and increases circulation. Depending on the patient's preference, powder may be applied in the same manner.

d. Walking with patients

The most important thing to remember when ambulating a patient is that the performer should hold on to the patient with the performer's right arm supporting him under the shoulders and the patient's left hand in the performer's left hand. If the patient holds onto the performer and begins to fall, the performer will be unable to prevent the fall.

e. Getting patients in and out of bed

First, the bed is lowered so that the patient will be able to step directly onto the floor. The performer then gets the patient's bathrobe and slippers from the closet and assists the patient in putting them on. The patient is allowed to sit on the edge of the bed for a few minutes before standing because he may be initially dizzy. When the patient is ready to stand, the performer faces him, puts one arm around his shoulders and the other around his waist, and gradually eases the patient to a standing position.

In returning the patient to bed, the same procedure is followed in reverse, lifting the back of the bathrobe so that the patient will not sit on it. The patient is gradually lowered to the bed in such a way that his buttocks will be as near to the center of the bed as possible. The patient's slippers and bathrobe are removed and returned to the patient's closet. The performer may have to assist the patient in lying down again by lifting his legs onto the bed.

f. Assisting with range of motion or other exercises

Range of motion exercises consist of moving the joints and limbs in all normal directions to maintain muscle tone and to prevent atrophy of muscles that the patient would otherwise not use because of his condition. If the exercises are passive, the performer does them for the patient. If the exercises are active, the patient is taught how to move his limbs and joints in a prescribed manner.

g. Caring for bedsores with tincture of benzoin.

The performer gently washes the area of the bedsore with soap and water and dries it thoroughly with a towel. Then, he obtains the tincture of benzoin from a cabinet in the treatment room and several 4" by 4" sponges from the Central Supply cart in the utility room. The performer opens the sponges at the patient's bedside, removes one and, with one hand, brings the four corners together. He then pours the benzoin over the sponge and, with a circular motion, covers the reddened area of the bedsore to toughen the skin and to prevent the skin from breaking. The patient is positioned so that there is no pressure on the bedsore while exposing it to air; thus the tincture of benzoin becomes sticky and dry.

21. Preparing patients for bed at night:

a. Changing or straightening linen

Bed linen is tightened and straightened after visiting hours; any soiled sheets are changed (refer to Function #6).

b. Turning or positioning patient

Refer to Function #20b.

c. Assisting patient in washing and brushing teeth

Refer to Function #20a.

d. Giving massages.

Refer to Function #20c.

22. Assisting patients with the following:

a. Walkers

Initially, the use of a walker is taught by the Physical Therapy Department. After initial instruction, the performer should then make sure that the patient has shoes, not slippers, on and that the patient uses the walker in the correct manner (i.e., picks it up, puts it in front of him, and then walks to it, rather than dragging it along). The performer should walk alongside of the patient and encourage him to go further each day.

b. Wheelchairs

The patient may have to be taught how to get in and out of the wheelchair; most important, he must be instructed to lock the wheels at both times. The patient must be encouraged to use a wheelchair, so that he will not remain in bed all day; but at the same time, he should not become so dependent upon the wheelchair that he cannot progress to a walker or crutches (depending on his condition).

c. Crutches

The correct crutch height is determined by subtracting 16 inches from the patient's total height. The patient must learn how to walk a straight line and how to navigate stairs; the way he is taught to navigate stairs will depend on which leg is affected and which side his stair-railings are on at home. The performer must consider a number of other factors. If winter, can this patient function on ice and snow? Is he a student, and will he be going to school on crutches? Does he live alone? Who will carry groceries and do laundry? Does he have a cast on the affected leg -- what will this do to a man's trousers?

d. Braces

Braces are fitted and the patient is educated in their use by an outside firm. The performer's primary responsibilities, then, are supportive and supervisory. How does the patient feel about his body image? If he has a back brace, who is going to help him get the brace off and on daily and help him get dressed and tie his shoes? Does the patient have shoes that give him proper support? What floor does the patient live on, and how does he plan on navigating?

e. Artificial limbs.

The performer's primary responsibility with an amputee is giving him emotional support. How is the patient reacting to the amputation [illegible] how is he adjusting to the limb? Has an outside agency been working with the family, in terms of emotional rehabilitation and guidance?

23. Lifting patients on and off litters.

The performer obtains a draw sheet from the linen cart in the utility room and folds it in half. This is slipped underneath the patient from his shoulders to the back of his knees. The litter is placed beside the bed, and the bed is adjusted so that both are equal in height. At least two performers are needed, one on either side of the patient. One performer moves the patient onto the litter by pulling on the draw sheet, while the other performer picks up his side of the draw sheet and lifts forward. To move a patient from the litter to the bed, at least two performers are needed -- one to move the head and shoulders of the patient, the other to move the hips and legs.

24. Taking and recording:

a. Temperature

Thermometers are located in the utility room on the shelf in individual sterile packages, clearly marked as oral or rectal thermometers. To take an oral temperature, the performer opens an oral thermometer package, holds the thermometer firmly between the thumb and forefinger and shakes it vigorously to move the mercury to the lowest possible level. He raises the thermometer to eye level and rotates it slowly, checking to make sure that the mercury is at the low mark. He then asks the patient to open his mouth, places the thermometer under the patient's tongue and instructs the patient to close his lips tightly. Three or four minutes later, the performer removes the thermometer and again rotates it at eye level until he can clearly read the temperature. The soiled thermometer is then returned to the utility room and put into a solution of Osyl. To take a rectal temperature, the same procedure is followed except that performer inserts a lubricated rectal thermometer gently into the patient's rectum about one inch. The performer must stay with the patient during the three minutes that the thermometer is in the patient's rectum. A temperature may also be taken by inserting the thermometer under the patient's arm for at least five minutes and instructing the patient to hold his arm firmly against his side (axillary temperature).

b. Pulse

With the palm of the patient's hand downward, the performer places his hand over the patient's wrist so that his second, third and fourth fingers rest along the inside of the patient's wrist. The performer then exerts a small amount of pressure until he can feel the pulsations in the radial artery with his second finger. Using a watch with a second-hand, the performer counts the pulsations for thirty seconds and then doubles the count to get an accurate rate of the heart beats per minute. If the performer questions the results for any reason, he should recount for a full minute.

c. Respiration rate

The performer glances at the patient's chest and,using a watch with a second-hand, counts the number of times the patient inhales per minute.

The performer records temperature, pulse and respiration rate into the T.P.R. book. The ward secretary then records the information onto the patient's clinical chart.

d. Blood pressure

A blood pressure cuff and stethoscope are obtained from the nurses' station. The cuff is attached to the sphygmomanometer, which is attached to the control panel in the patient's room. The cuff is wrapped firmly but not tightly around the patient's arm just above the elbow. The performer locates the brachial artery, puts the stethoscope in his ears and places the flat portion of the stethoscope over the brachial artery (just above the inner part of the elbow). The performer squeezes the bulb attached to the cuff to inflate the cuff to about 330 mm. mercury, thereby occluding the blood flow in the artery. The air valve is then gradually released; when the blood begins to flow again, a beat is heard. The performer observes the gauge attached to the cuff and records the number at which the first beat is heard (systolic pressure - maximum pressure exerted on the arterial walls). The performer continues to release the air valve until the last beat is heard and records that as the diastolic pressure (constant pressure exerted on the arterial walls).

The performer records blood pressures in the B. P. book; the ward secretary transcribes the information onto the clinical charts.

e. Weight.

The performer rolls the scales from the treatment room to the patient's bedside, assists the patient to stand on the scales and records the weight. In some cases, the patient may be able to walk to the treatment room with the performer and be weighed there. Patients should be weighed in the morning before breakfast whenever possible. The performer records all weight in the weight book. This information is then written in the clinical chart.

25. Assisting patient with Sitz bath.

There are two methods in which a Sitz bath can be given. In the first, the performer obtains a disposable Sitz bath kit from the utility room and brings it to the patient's bedside. The performer then fills the round plastic basin with lukewarm water, places it on the toilet rim, and brings the toilet lid down. The patient is then instructed to sit on the toilet seat for 15-20 minutes. When the patient is finished, the performer gently wipes the patient's rectal area with a towel, empties the basin into the toilet, and flushes the basin clean with the bedpan flusher. In the second method, the performer draws a lukewarm bath, with about six inches of water in the tub. After placing a towel on the bottom of the tub for the patient to sit on, the performer assists the patient in getting into the tub and instructs him to sit there for twenty minutes. The performer returns later to assist the patient in getting out of the tub and drying off. The patient is then escorted back to his room. The performer returns to the tub, drains the water, places the soiled towel in the laundry hamper in the utility room, and washes the tub, first with Ajax and then with aqueous Zephiran.

26. Applying or changing:

a. Ice bags

The performer obtains an ice bag from the utility room and a pillow case from the laundry cart. The performer then fills the ice bag two-thirds full with crushed ice from the ice dispenser in the nourishment center. The excess air is removed, the cap is screwed on, and the ice bag is slipped into the pillow case and taken to the patient.

b. Hot water bottles

The performer obtains a hot water bottle and a water thermometer from the utility room and a pillow case from the laundry cart. The performer then turns on the water in the sink in the utility room and tests it until it is constant at about 120° F (the temperature necessarily varies with the age and condition of the patient). The bag is filled about two-thirds full of water, excess air is expelled, and the opening is closed. The performer then places the bag inside the pillow case and brings it to the patient's bedside. The area on which the bag has been placed should be checked frequently to make sure the bag is not burning the patient.

c. Ace bandages

Ace bandages are kept on the Central Supply cart in the treatment room. When applying the ace bandage to the lower extremity, for example, the performer begins at the instep of the foot and wraps in a circular fashion, going around the heel up to the ankle and then down again in a figure "8" around the instep. The performer continues up to the ankle again, up and around the calf, and up to the knee. The key to applying an ace bandage is to have an even distribution of tension and support. The bandage is secured with metal clips. Exception: Ankle to groin. The performer reverses the wrapping and starts from the groin down to the ankle. This prevents the bandage from slipping.

d. Elastic stockings

Elastic stockings are obtained from the Central Supply cart in the treatment room. The performer should position the patient so that he is lying on the bed with both legs exposed. Depending on the patient's preference and size and the heat in the room, the performer may want to powder the patient's legs first. The performer then places both hands at the top of the stocking and works his way down to the toes so that the stocking is in a bunch at the base. Standing alongside the patient with his back facing the patient, the performer next brings the stocking over the patient's toes,along the instep of the foot, and then over the heel. He releases the stocking and checks the portion already on to make sure the heel is fitted properly. The performer then picks up the stocking again and gradually pulls the remainder of the stocking to the knee, using even tension and pressure.

e. Binders

The performer obtains a binder from the laundry cart and about 15 safety pins from the nurses' station. He explains to the patient what he is going to do and pulls the curtains. The patient is positioned so that he is lying flat, and the area from the pubic bones to the base of the rib cage is exposed (abdominal binder). The performer then asks the patient to flex his knees and lift himself off the bed while the performer slides the binder underneath the patient, making sure that there are no wrinkles underneath. With the patient lying flat again, the performer brings the flap nearest him over the patient's abdomen and then brings the flap furthest away from him over the first flap. If there is enough material on the second flap, it is folded under about one to two inches to make a smooth edge. The performer then pins the two flaps together in a prescribed fashion. Subsequent flaps are crisscrossed and pinned in the same manner, checking to make sure that the binder is not uncomfortably tight, but rather snug and supportive.

f. Slings

The performer obtains a sling from the Central Supply cart in the treatment room. With the patient lying down, the performer places the affected arm in a "pledge-allegiance" position over the patient's chest. The performer removes a folded triangle of cloth and two safety pins from the sling package; he places the long, folded side of the triangle underneath the affected limb so that the pointed end of the triangle is at the elbow. With the long portion under the wrist, the two ends of the sling are brought together around the patient's neck and secured with a knot. The pointed end of the triangle is fan folded and squared off at the elbow and is secured with the two safety pins. If the patient is being discharged, a family member should be instructed how to apply a clean sling.

g. Restraints.

The performer should remember that restraints are applied to protect the patient, not to punish him. Restraints, tape and ABD pads are obtained from the laundry cart and the Central Supply cart. The ABD pad is opened, placed around the patient's wrist and secured with tape. The restraint is laid across the bed, and a figure "8" loop is made. The patient's hand is slipped through the loops, which are then drawn together securely around the wrist to prevent them from slipping off. The remaining tails of the restraints are then secured underneath the bed onto the springs, allowing the patient about six inches of freedom of movement. Approximately every hour, the restraints should be released and the patient's arm put through range of motion exercises.

27. Giving cleansing treatments:

    a. Enemas

    The performer obtains the disposable enema kit from the Central Supply cart and some paper chux pads and an IV pole from the utility room. The performer then explains what is going to happen to the patient, asks the patient if he has ever had an enema before, and asks if he feels that he can retain the solution and expel it in the bathroom or if he prefers to use a bedpan. After the curtains have been drawn, the patient is placed on his left side and positioned with his right leg flexed. The performer then places the chux underneath the patient's buttocks, covers the patient and returns to the utility room with the enema bag. The performer prepares a solution of water (at about 105° F.) and castile soap, filling the bag to about 1000 cc. Returning to the patient's bedside, the performer removes the covering on the prelubricated rectal tube and carefully inserts the tube about three inches into the rectum. While keeping one hand on the rectal tube, the performer slowly elevates the enema bag on the IV pole about 18 inches from the bed and releases the clamp. If the patient experiences any pain or discomfort, the tube is clamped immediately and the patient is instructed to breathe deeply through his mouth. When the discomfort is gone, the clamp is released again. When the solution has been instilled into the colon, the tube is clamped to prevent air from entering the colon, and the performer informs the patient that he is removing the tube. The performer wipes the anal orifice with a corner of the chux, assists the patient in getting out of bed, and helps him to the bathroom (unless the patient is going to use a bedpan). When the patient has expelled the enema, the performer evaluates and records the results on the patient's chart.

b. Douches.

The performer obtains a douche tray from the treatment room or from Central Supply, takes it to the utility room and prepares the prescribed solution. He explains the procedure to the patient and instructs the patient to void and to wash the vaginal area with soap and water. After this is completed, the performer instructs the patient to lie in the dorsal recumbent position and places the patient on a bedpan. The douche solution is elevated above the patient's hips and the clamp is released, allowing the solution to flow freely over the vaginal area, thus cleansing it. The nozzle is then inserted gently about three inches into the vagina with a downward and backward aim; it is rotated carefully to allow the solution to cleanse all areas of the vagina. When the solution is gone, the tubing is clamped and the nozzle is removed. The vaginal area is wiped downward with a tissue, the bedpan is removed, and the results are evaluated and recorded. The bedpan is cleaned with the bedpan flusher and returned to the patient's bedside table. The douche tray is returned to the utility room and is cleaned with soap and water before being placed in the basket to be returned to Central Supply for autoclaving.

28. Caring for wounds:

   a. Dressing wounds

The performer obtains a dressing tray, several sponges (4" x 4"s and ABD pads), tape, sterile gloves, a sterile towel and a wax paper bag. Note: The cleansing solution needed depends on the type of dressing. The procedure is explained to the patient, and the patient is asked to lie flat on his back in bed (assuming the dressing to be changed is on his abdomen). The wax paper bag and the dressing tray are opened and placed on the sterile towel on the side of the bed. The sponges are opened, using sterile technique, and dropped onto the sterile field on the dressing tray. With one hand, the performer removes as much of the old dressing as possible and drops it into the open wax paper bag on the bed. The performer then puts on sterile gloves. If any of the old dressing remains, the performer removes it with the small snaps from the dressing tray and places it in the bag. The wound is then inspected and evaluated in terms of drainage, healing processes and so on. Using sterile forceps or sterile sponges to center it, the performer places a new dressing (sponges and ABD pads) on the patient's abdomen. After the dressing is secured with tape, the performer removes his gloves and discards them in the bag. The performer than takes the closed wax paper bag and the used dressing tray to the utility room, discards the bag in the trash receptacle, and washes the instruments and the dressing tray with soap and water; he then places them in the basket to be returned to Central Supply for autoclaving.

b. Irrigating wounds

The performer obtains an irrigation tray plus the above-mentioned equipment from the Central Supply cart in the treatment room. The performer, while maintaining aseptic technique, takes this equipment to the utility room and pours the prescribed irrigation solution into the sterile basin. For example, normal saline is usually used for irrigating abdominal wounds. The soiled dressing is removed in the manner described above, and the irrigating solution is drawn up into the syringe and poured over the wound. The performer evaluates the results of the irrigation (i.e., is there any pus, mucous, tissue and so on?); he then places a clean dressing over the wound in the manner described above. The clean-up procedure is the same as that in #28a.

c. Changing dressings.

Refer to 28a.

29. Feeding patient by tube.

The performer obtains a glass 50cc. syringe and an adaptor from the treatment room and gets the patient's tube feeding from the refrigerator. The tube feeding should be removed from the refrigerator about one half hour before the treatment to bring it to room temperature. The head of the patient's bed is elevated to about 45 degrees. One end of the adaptor is attached to the end of the feeding tube, which has already been inserted through the patient's nose into his stomach. The performer attaches the syringe to the other end of the adaptor; then he releases the clamp on the feeding tube, while aspirating (or suctioning) the patient by pulling out the plunger on the syringe. The performer then re-clamps the feeding tube, cleans out the accumulation of aspirated fluid and pours the feeding into the syringe. The clamp is released and the syringe is raised, as necessary, to allow the fluid to flow in by gravity. The performer then clamps the tube again before the final drop is out of the syringe, thereby preventing air from entering the feeding tube. The performer removes the syringe, washes it with soap and water and puts it in the Central Supply cart. The feeding is returned to the refrigerator.

30. Caring for precaution or reverse precaution patients.

Precaution patients: Patients on precautions are generally isolated in a private room to reduce the chance of infecting other patients, the performers or visitors. The performer orders a large supply of precaution gowns and some disposable laundry bags and gets a can of disposable or washable masks and a steel laundry hamper frame from the utility room. All linen is placed in the linen hamper, which has been put inside the patient's room. Before entering the room, the performer must don a gown and mask, which are kept just inside the door of the patient's room. When the laundry hamper is full, it is tied securely, marked with the name of the organism and dropped down the laundry chute. Food is served on disposable paper dishes; when the patient has finished eating, these are thrown into the basket lined with a plastic bag in the patient's room. If equipment which is not disposable is used, it is washed with soap and water in the patient's room, placed in a bag, marked with the type of organism and sent to Central Supply to be autoclaved. Any supplies, equipment or instruments that enter the patient's room cannot come out unless they are clearly and properly marked and are placed in a disposable container. The precaution patient must not feel that he is being neglected; performers have a tendency to shun precautions and thereby ignore the patient.

Reverse precautions: Reverse precautions may be instituted with critically ill patients who are susceptible to infection from the performers. Precaution gowns are ordered as above and then sent to Central Supply to be autoclaved. A can of masks and the autoclaved gowns are placed just inside the door of the patient's room, and must be put on by any performer who enters the room. There is no restriction in terms of paper dishes or disposable bags. The primary goal of reverse precautions is to keep everything that touches the patient as clean and sterile as possible.

31. a. Setting up suture sets

Bringing suture sets to bedside: The performer obtains a suture set, a package of nylon sutures, a package of sterile gloves, two packages of 4" x 4" sponges, a bottle of aqueous Zephiran and a bandaid from the utility room and/or the treatment room and brings them to the patient's bedside. Using aseptic technique, the performer opens the suture kit and sets it on the mayo stand next to the patient. He then opens the suture package, drops the sutures into the sterile field, fills the three-ounce container in the suture set with aqueous Zephiran and opens the packages of 4" x 4" sponges onto the sterile field. The performer then goes to the medication closet, gets a 2 cc. 25-gauge syringe and draws up 2 cc. of Xylocaine 1%. This and the unopened sterile gloves are placed next to the suture set.

b. Assisting doctor in removing sutures.

The performer obtains a suture removal set, a package of extra 4" x 4" sponges and any equipment necessary for a dressing (refer to #28a). The performer should know in advance what type of dressing the physician will want. When the physician is ready, the performer, using aseptic technique, opens the suture removal set for the physician, opens the sponges and drops them on to the sterile field.

32. a. Doing cervical smears

A female performer must be present when a doctor is doing a cervical smear. She assists the patient into the dorsal recumbent position with knees flexed; the patient's feet may or may not be in stirrups. The performer obtains a vaginal tray, a cervical smear container and sterile gloves from the utility room and, upon returning, opens the vaginal tray for the physician. The performer may reassure the patient as necessary. When the physician has obtained the specimen, the performer holds the cervical smear container open so that the physician can drop the slide inside. The performer then labels the specimen with the patient's name, address, date and the physician's name.

b. Venereal disease smears.

The performer obtains a plastic disposable container with slides, some sterile cotton applicators and a pair of sterile gloves. The performer then screens the patient properly and exposes the area of the lesion. The specimen is taken with the cotton applicators and smeared on a slide, which is then placed in the plastic container. The specimen is marked with the patient's name, address, date and doctor's name.

33. Assisting doctor in dermatology problems:

a. Wart removal

The performer obtains a dressing tray, silver nitrate sticks and a large bandaid from the utility room; he takes these to the patient's bedside and opens the dressing tray and the package of silver nitrate sticks. When the physician has completed the procedure, the performer takes the dressing tray to the utility room, where he washes the equipment and places it in the basket to be returned to Central Supply.

b. Skin biopsies.

The performer gets a biopsy set, a specimen container, a bottle of tincture of Zephiran and suture material, if necessary, from the utility room. Returning to the patient's bedside, the performer opens the biopsy set and fills the small glass with tincture of Zephiran. When the physician has taken the specimen, it is put into the specimen container and labeled as in #33a. The used equipment is cared for as above.

34. Caring for lacerations:

a. Wash laceration

Example: hand laceration. The performer brings a large sterile basin and a small bottle of Phisohex to the patient. The basin is unwrapped and filled with warm tap water to which approximately one half ounce of Phisohex has been added. The patient is asked to place his entire hand in the basin to soak the wound. When the patient has soaked for a period of time, the performer wraps the wound with sterile 4" x 4" sponges. The soiled basin is taken to the utility room where it is washed and placed in the Central Supply basket.

b. Dress laceration.

The performer removes the sponges in which he has just wrapped the wound and evaluates the laceration. If sutures are necessary, see #31a. If no sutures are necessary, the performer applies a pressure dressing (same sterile 4" x 4" sponges) and tapes it securely.

35. Using EKG equipment:

a. Bringing equipment to the bedside

The performer obtains the EKG machine from the treatment room on the nursing unit or from the adjacent nursing unit (there is one EKG machine for each floor of the building). The performer opens the drawer of the machine and checks to make sure the electrodes, paste or alcohol sponges, and recording paper are there. The performer then wheels the machine to the patient's room.

b. Setting up equipment

The performer plugs the machine into the wall socket on the control panel at the head of the patient's bed. The performer assists the patient to a supine position in bed. The performer then attaches the electrode cable to the rear of the machine.

c. Attaching electrodes to the patient

The performer removes the electrode paste and the electrodes from the drawer of the machine. The four electrodes are marked: LL-left leg, RL-right leg, LA-left arm, RA-right arm. These markings indicate the extremity on which the electrode is to be placed. Taking the electrode marked "LL," the performer opens the electrode paste tube, squeezes a small amount of paste onto the metal electrode or places a 2" x 2" alcohol sponge between the electrode and the limb, and attaches this to the left leg around the ankle (where there is the least amount of body hair and also a superficial artery). This electrode is secured by wrapping the rubber belt which is attached to the electrode around the ankle and snapping it over the electrode. This belt should be put on securely, but not tightly. The performer repeats this process with the "RL." The electrodes for the arms are placed around the wrists, with the metal electrodes on the inner surface of the arm.

d. Operating EKG equipment - not done by performers - only physicians.

36. Drawing blood.

In the treatment room on the nursing unit, the performer obtains several red-top tubes, a lavender-top tube, a vacutainer needle, a blood sleeve, a tourniquet and some alcohol sponges from a tray labeled "blood taking." The performer brings this equipment to the patient's bedside. After the physician has drawn the blood from the patient, the performer takes the tubes and other equipment back to the treatment room. The needle is discarded in the wastebasket; the blood sleeve is washed in cold water in the sink; and the tubes are rinsed under the faucet and wiped with a paper towel. The tourniquet and alcohol sponges are returned to the tray. The performer then labels the tubes with the patient's name, unit number, the date and the nursing unit.

37. a. Ordering drugs from pharmacy

The performer takes the medicine cards for the day and groups them according to drugs (example: all those medicine cards which say "Multi-Vits" are grouped together and so on). This includes all drugs which are given by mouth, intramuscularly or intravenously. The performer then judges how much of a particular drug she will need for a definite 24-hour period and compares this with what she has on hand in the particular bottle, vial or ampule. If there is a deficit in the stock supply on the unit, the performer writes the name of the drug and the quantity needed on a yellow requisition pad. The performer then checks the emergency cart in the treatment room for drugs which have been used in an emergency and need to be replaced from the pharmacy. She adds these to the list on the requisition. The performer then checks the utility room and the treatment room for stock solutions which are low and need to be refilled from the pharmacy (examples: alcohol 70%, phisohex, clinitest tablets, etc.). These are added to the yellow requisition which is then placed in the wire basket on the floor in the medication closet along with any empty oral medication bottles and empty stock solution bottles. The performer then checks the refrigerator in the medication closet; if stock supplies of ether, oral liquid cathartics or suppositories are low, these items are also added to the list. The performer then places the basket outside the door of the medication closet for the pharmacy to pick up.

Narcotics: The performer counts the narcotics and barbiturates with the performer from the past shift. They are simultaneously checked with the narcotic record sheet which is kept in the medication closet. When all the used and unused narcotics are accounted for, both performers sign the sheets. When the pharmacist comes to the nursing unit to fill the narcotics order, the performer once again counts the narcotics with the pharmacist for accuracy.

b. Receiving drugs

The drugs brought from the pharmacy in the basket are left outside the medication closet door by the performer from the pharmacy.

Narcotics: The pharmacist and the performer count the narcotics and barbiturates simultaneously in the medication closet. The drugs are then locked in the narcotic closet under a double lock.

c. Putting drugs away.

The drugs in the basket are returned either to the shelves in the medication closet in alphabetical order, to the refrigerator in the medication closet or to the shelves in the utility room and treatment room.

38. a. Administering specified medication

Example: the performer is asked to give the patient 10 grains of aspirin. The performer goes to the doctor's order book, which is found on the nurses station, turns to the page with the patient's name on it and, if the order for aspirin is there, makes out a pink medication card (found on the nurses station). The performer then goes to the medication closet and takes down the bottle marked "Aspirin." The performer pours the medication and again checks the label and dosage of the drug. The performer returns the bottle to the shelf and again looks at the label on the bottle. The performer then takes the medication and the medication card to the patient's bedside. The performer checks the ID bracelet on the patient's arm with the name on the medication card. When the performer is convinced that he has the right patient, he gives the medication to the patient and passes the patient a glass of water. When the patient has swallowed the medication, the performer may leave the room.

b. Noting time and amounts on patients' charts.

The performer goes to the Medication Kardex on the nurses station and turns to the page with the patient's name on it. If the aspirin is a new order, the performer writes the name of the drug, the dosage and the route of administration. To the right of this, the performer finds the corresponding column for that day's date and under that writes the time and her initials. If it is a single dose medication, not to be repeated, the performer writes the name of the drug, the dosage, the route of administration, the time and her initials under the column of that day's date.

39. Performing functions related to oxygen masks, catheters:

a. Oxygen masks: Bringing equipment to bedside

The performer obtains an oxygen mask and an oxygen nebulizer bottle with a flow gauge from the utility room. If there are none there, the peformer calls Inhalation Therapy and asks them to replace the floor's supply. If the need is urgent, one can be borrowed from another nursing unit or during an emergency, one can be taken off the emergency cart. The performer then fills the nebulizer with distilled water from the bottle in the utility room.

b. Assembling

The performer removes the nebulizer from the plastic container and inserts it into the control panel above the patient's bed in the outlet marked "Oxygen." The performer holds the nebulizer at an even level and pushes it into the outlet. Once the connection has been made, the performer immediately releases the nebulizer; it will pop out slightly, indicating that it is in the outlet correctly. The performer then tests the gauge by turning it on, causing the water inside the nebulizer to bubble. The performer turns the valve off at this time. The oxygen mask is opened, and the bag at the base of the mask is unfolded.

c. Inserting or applying

The performer places the mask over the patient's mouth and nose and pinches the nose slightly where the metal clip crosses the bridge of the nose to provide for comfort and to prevent the mask from slipping off the patient's face. The elastic band is placed around the head and adjusted for comfort at the side of the mask. The performer takes the long green tubing from the nebulizer and attaches it to the specified area on the side of the mask. Then he turns the valve on the gauge to the specified amount of liters and observes the patient for response.

d. Adjusting or caring for equipment

If the mask slips over the face, the nose clip and the elastic can be adjusted for proper fit. The performer must be careful that the filter in the nebulizer is kept clean and that the fluid level in the nebulizer is maintained.

e. Removing

The performer shuts off the gauge first and then slowly releases the elastic around the head and the nose clip. If only temporary removal is necessary, the performer places the mask around the nebulizer on the panel. If the removal is permanent, the performer discards the face mask and the green tubing. He takes the nebulizer to the utility room, washes it with warm water and returns the gauge and the nebulizer to Inhalation Therapy for sterilization.

Catheters: (Indwelling)

a. Bringing equipment to bedside

The performer goes to the treatment room to get a pair of sterile gloves, a 20cc syringe, a needle and a 30cc vial of sterile water. The performer then goes to the utility room for a disposable catheter tray, a disposable urinary drainage bag, a foley catheter , a bottle of aqueous Zephiran, two 4" x 4" sponges, adhesive tape and a bottle of tincture of benzoin.

b. Assembling

The performer explains the procedure to the patient, draws the curtains and assists the patient into the dorsal recumbent position, taking care to maintain the patient's privacy. The performer then goes to the side of the bed which is most convenient for him to work from (depends on whether the performer is right-or left-handed). The performer opens the disposable cathether tray and places it between the patient's knees; then he opens the Zephiran, discards a small amount and pours some into the container with the rayon balls within the catheter tray. The performer opens the catheter and drops it onto the sterile field. The performer then draws 20cc of sterile water up into the glass syringe and places this next to the sterile field. Next, the performer opens the disposable urinary drainage bag and places this next to the syringe away from the sterile field.

c. Inserting or applying

(Example: female) The performer opens the package containing the sterile gloves and puts them on. The performer holds the labia open with one hand and with the other hand picks up one rayon ball soaked in Zephiran and wipes down and away from the vagina. The ball is discarded away from the sterile field; the procedure is repeated three times. The hand holding the labia has now exposed the urinary meatus; with the other hand the performer picks up the catheter and dips it into the lubricant in the tray. The performer then gently inserts the catheter into the meatus. When urine begins to flow from the catheter, the performer knows that the catheter is in the bladder. The performer gently releases the catheter and picks up the syringe with the sterile water. The performer removes the needle from the syringe, attaches the syringe to the end of the catheter and instills 5-20cc of fluid into the catheter, thereby inflating the balloon at the tip of the catheter which is now in the bladder. The performer attaches the urinary drainage bag to the end of the catheter and attaches the bag underneath the bed; the patient's thigh is wiped with benzoin and allowed to dry before the catheter is taped to the area.

The performer then gathers the tray, the syringe and the gloves and returns to the utility room. The tray and gloves are thrown into the trash receptacle, and the syringe is washed and placed in the basket to be returned to Central Supply. The Zephiran is returned to the the treatment room.

d. Adjusting or caring for equipment

Catheter care is included in the patient's daily care. The performer goes to the treatment room and gets a bottle of aqueous Zephiran, a wax bag, two packages of 4" x 4" sponges and a pair of sterile gloves. The patient is again assisted into the dorsal recumbent position, and the area around the catheter is washed in the same manner as it was when the catheter was inserted.

e. Removing.

The performer goes to the treatment room to obtain a wax bag and a package of 4" x 4" sponges. The patient is asked to assume the dorsal recumbent position, and the performer opens the wax bag between the patient's knees. The performer cuts the catheter at the point where the solution was instilled and any drainage is collected in the bag. When the balloon has deflated, the catheter is gently removed from the meatus. The performer wipes the area and discards the catheter in the wax bag. The wax bag and urinary drainage bag are taken to the utility room where the amount of urine is measured. All equipment is then discarded; the time of removal and the amount of urine in the bag are recorded in the patient's chart. The performer notes in the patient's chart when the patient is due to void (8-10 hours). First voidings must be measured and evaluated, and the time of the voiding must be charted.

40. Tracheotomy tubes:

The performer gets a post-operative tracheotomy set from Central Supply or from the treatment room. He gets a gallon of distilled water, sterile gloves and a bottle of hydrogen peroxide from the treatment room and takes these to the utility room. In the cabinet marked "Inhalation," the performer will find disposable suction catheters. The performer opens the tracheotomy set, which is composed of pipe cleaners, two sterile boats with covers and two round basins with covers. One basin and one boat are filled with hydrogen peroxide, while the other basin and the other boat are filled with distilled water. The covers are marked with adhesive tape with the date, the hour and the solution; and the covers are replaced. The pipe cleaners are left loose on the tray. A sterile towel is placed over the equipment. This equipment plus the catheters and the sterile gloves are brought to the bedside and set up on the overbed table. When the patient is suctioned, the inner cannula of the tracheotemy tube is removed and placed in the basin with the hydrogen peroxide. Then it is cleaned with a pipe cleaner and rinsed in the boat of hydrogen peroxide. The performer then returns the inner cannula to the tracheotemy tube and locks it in place. The other two basins with sterile water are used to rinse the suction catheter during the process of suctioning the patient. The catheter is changed every time the patient is suctioned. The patient is asked to hyperextend his neck to the right; the performer then inserts the catheter and passes it slowly down into the left lung. When the performer has gone as far as he can with the catheter, he places his thumb over the suction opening on the catheter and slowly draws back, gently rotating the catheter at all times. The patient will cough and emit secretions at this time. The catheter is removed and rinsed, and the procedure is repeated, reversing the position of the neck and reaching into the right lung. The solutions and tray are changed every eight hours.

The equipment is returned to the utility room where it is washed with soap and water, dried and placed in the basket to be returned to Central Supply for autoclaving.

Suction equipment:

The performer obtains suction equipment from the Inhalation Therapy Department. The suction bottles are attached to the control panel at the head of the bed. They are inserted in the same manner as the oxygen nebulizers previously mentioned and described. Suction bottles are emptied at the end of each shift in the utility room in the hopper, washed and replaced. When the patient no longer requires the set-up, it is removed, washed and returned to the Inhalation Therapy Department for sterilization. (Refer to Function #39 - oxygen mask, #40 - tracheotemy tubes and #46 - ambu bags).

Oxygen Equipment: (See #39-oxygen mask and #46-ambu-bag).

Monitors and Defibrillators:

The performer goes to the treatment room to obtain a package of disposable electrodes and derma-circ paste. If the patient is a male , his chest is shaved; otherwise, the area on which the electrodes are to be placed is prepped with tincture of benzoin from the treatment room and allowed to dry. The paste is placed in the center of the wire mesh on the electrode, and three electrodes are spaced evenly across the chest (these should be placed above the nipple line, in the event that an EKG is needed; these electrodes need not be removed, and the patient will not have to be charged for another set). The electrode cable is then attached to the electrodes. The red cable is attached to the lateral side near the heart, the black in the center, and the yellow, the grounder, at the point furthest from the heart. These electrodes can be left on the patient for 5-14 days. When the patient no longer needs the monitor, the electrode cable is cleaned and returned to the unit from which it came.

The performer only plugs in the defibrillator. The physician operates it.

41. Performing functions relating to IV's:

a. Bringing equipment to bedside

The performer goes to the utility room, obtains the ordered IV solutions. a venopak, a needle, a tourniquet, adhesive tape, an armboard and alcohol sponges (the IV pole is on the bed) and brings this equipment to the bedside.

b. Assembling

The performer releases the seal on the IV bottle and unscrews the cap on the bottle. The performer then opens the venopak, removes the plastic cap and screws the venopak onto the IV bottle. The performer holds the bottle inverted over the sink with one hand and, with the other, removes the plastic tip at the end of the venopak. When the fluid runs through the tubing and removes the air, the performer lowers the bottle, replaces the tip on the tubing and clamps the tubing. The performer then places the bottle inverted on the IV pole at the head of the bed.

c. Inserting needle, starting IV, hanging bottles

The performer places the tourniquet above the elbow snugly. The needle is attached to the end of the venopak on the IV bottle and the performer feels for a vein in the ante-cubital area. The needle is held with the bevel up and parallel to the vein. The needle is inserted into the vein; when the blood begins to flow back into the needle, the tourniquet is released and the clamp on the IV tubing is released. A 2 to 3 inch piece of adhesive tape is placed over the joint of the needle and the tubing to secure it. The armboard is placed under the ante-cubital area; and a strip of adhesive is placed above the elbow, midway on the forearm, encircling the whole arm.

d. Changing labeled bottles

When the fluid has reached the neck of the bottle, the tubing is clamped; the seal on the new bottle is broken; and the cap is removed. The first bottle is taken down and unscrewed; then the second bottle is inverted and placed on the IV pole. If the patient is on I&O, the time,the amount of fluid and the kind of solution absorbed and started is noted.

e. Discontinuing IV service.

The performer takes to the bedside an alcohol sponge and a 4" x 4" gauze sponge. The adhesive tape is cut and removed from the patient's arm. The alcohol sponge is placed over the point where the needle enters the arm, and the 4" x 4" sponge is placed over this. The performer makes sure the tubing is clamped before he gradually pulls the needle from the vein. The patient's elbow is flexed and elevated for a few minutes. Care should be taken when flexing the arm depending on the length of immobility action. The performer removes the IV bottle to the utility room and discards it in the trash receptacle.

42. Assisting physicians during treatment and examination of patients:

a. Bringing equipment to bedside
b. Preparing equipment or patient, assembling equipment
c. Holding or restraining patient as necessary
d. Removing and cleaning equipment afterwards.

Equipment is obtained from either the treatment room or the utility room

The type of treatment given or the type of examination to be done determines the equipment that the performer brings to the patient's bedside. The equipment is assembled for the physician. Most important of all is preparing the patient for whatever the physician plans to do. With proper and skilled preparation, the patient will not need to be restrained, although he may have to be held in a certain position. It is important for the patient to reveal his feelings and thoughts about the upcoming procedure so that they can be dealt with skillfully. Once fears are explained and allayed, patients are far more cooperative; thus, the procedure that could have been a disaster becomes a profitable experience. When the procedure is finished, the patient may once again wish to discuss what occurred. This is healthy and gives the patient a sense of accomplishment. The performer then removes the equipment to the utility room, disposes of what is disposable, washes other equipment with soap and water and places it in the basket to be returned to Central Supply.

43. Counting narcotics and barbiturates at the change of each shift.

Refer to Function #37.

44. a. Patient's condition

The performer would report any unusual change in vital signs, a sudden loss of consciousness, highly elevated fever, etc. The performer would report any adverse change or any marked improvement in the patient's condition to the supervisor or the physician.

b. Patient's reaction to drugs, treatments, IV's

The performer should be aware of the side effects of all drugs that he administers. If a patient should complain of one or more of these side effects, the drug should be omitted and the physician or supervisor notified. Patients should be observed for any changes in the appearance of the injection site in intravenous therapy (e.g., redness, swelling), for changes in respiration, for a pyrogenic reaction (development of fever and chills) and for any other unusual symptoms.

c. Significant incidents.

Examples: Patients falling out of bed, personal trauma which might influence the patient's progress (such as a death in the family). The performer should report these to his supervisor.

45. a. Serving emotional support to patients

The most important idea to keep in mind when caring for patients is to treat them as you would wish to be treated were the situation reversed. The performer must remember that a procedure familiar to him may be an unfamiliar and frightening one to the patient. The performer should always explain what he is doing to a patient, encourage the patient to express anxieties and, above all, listen.

b. Entertaining patients (particularly children).

Children are the easiest of all to entertain. However, entertainment should be secondary to helping the child to adjust to a hospital environment, as with very sick children who are away from their parents for the first time. Extra care should be taken to simulate conditions to which the child is accustomed, if possible. For example, Japanese or Chinese cultures are distinctive in that a child is constantly being held until he is over one year old. If realized, this factor may explain the continuous crying of that child who is not held constantly in the hospital.

46. Participating in cardiac arrest team:

a. Bringing equipment to bedside

Each nursing unit has a Resuscitation Cart, kept in the treatment room and used only for such emergencies. This is immediately brought to the bedside of a patient suffering from cardiac or respiratory arrest. The performer then obtains a monitor and defibrillator from the treatment room; if none are there, the performer calls one of the medical floors and asks that their monitor and defibrillator be sent to the unit immediately for a resuscitation.

b. Call "444"

Before the equipment is brought to the bedside, the performer immediately goes to the telephone and dials "444." When the telephone operator answers, the performer says "resuscitation" and the name of the nursing unit. This is of top priority and should be done calmly and quickly.

c. Start external cardiac massage

The performer quickly returns to the patient's bedside and provides an oral airway by inserting a plastic airway. Then with the assistance of another performer, he takes the external cardiac massage board off of the resuscitation cart and places it underneath the patient, from the shoulders down. With a closed fist, the performer pounds the patient on the chest in the area of the apex of the heart, adjacent to the sternum. One performer then cups his right hand over his cupped left hand and places both hands about two inches from the sternum toward the heart. Standing erect, the performer extends both arms and exerts a pressure at this site; then he releases the pressure. The performer repeats this action every two to three seconds on the patient's chest.

d. Use ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation
At the same time, the second performer removes the oxygen nebulizer and the ambu-bag from the resuscitation cart. The nebulizer is filled with distilled water and attached to the wall outlet on the control panel at the head of the bed. The oxygen is turned on and the green tubing is placed in the ambu-bag. The performer then hyper-extends the patient's head, holding the jaw shut, and places the face mask of the ambu-bag over the patient's mouth and nose. The straps on the mask are fixed in place; while still holding the patient's jaw closed, the performer begins to squeeze the ambu-bag. The bag is squeezed one time for every two-three chest depressions.

e. Remove, clean equipment, restock emergency cart afterwards.
The oxygen nebulizer is removed from the control panel, the solution is emptied, and it is returned to Inhalation Therapy for sterilization

and replacement. The face mask is removed from the ambu-bag and washed with aqueous Zephiran; the valve on the ambu-bag is taken apart, washed with soap and water, dried, re-assembled and then connected to the ambu-bag. The ambu-bag is replaced on the resuscitat cart. The cardiac board is removed from underneath the patient, washed with soap and water and replaced on the cart. The cart is then put back in the treatment room. The monitor and defibrillator are cleaned with soap and water and returned to the nursing unit from which they came.

During the resuscitation, another performer has been keeping track of the drugs and supplies which were used. This list is sent to the pharmacy where the drugs used are replaced. Any supplies used that come from Central Supply are replaced from the stock in the utility room.

Other: During a resuscitation there are at least two performers assisting the physician (example: drawing up medication). Considera must be given to the patient's family, especially if they were presen when the patient went into cardiac arrest. Periodically a performer should go outside and reassure the family that the patient is being helped as much as possible. To a waiting and anxious family, a few minutes can be an extremely long time, especially when the door is cl and there are 6-8 people working on the patient.

47. Beginning preparations for patient scheduled for surgery:

a. and b. Wash and shave operative area

These preparations are routinely done by performers from the operating room. Refer to the Operating Room Appendix, Function #14.

c. Instruct patient not to eat or drink

The evening before surgery, the patient is asked how he feels about the surgery and what he thinks will happen to him. The performer listens to the patient and tries to tell him as much as possible about exactly what will occur. After midnight, all food and fluids will be restricted so that the stomach will be empty and there will be no chance of the patient aspirating. The patient is reminded that he will be able to wash up and brush his teeth in the morning, providing he does not swallow any water.

d. Remove jewelry, bobby pins, dentures and other prostheses

All nail polish, dentures, prostheses, contact lenses, make-up, hair pieces, etc., must be removed prior to surgery. All jewelry must also be removed, with the exception of wedding rings; these can be left on and taped to the patient's finger.

e. Other.

The patient is told that when he reaches the operating suite he will be taken first to the recovery room where an IV will be started, the abdomen prepped again with phisohex and a cap placed over his hair.

It is important for the performer to tell the patient and his family about what time in the morning he will be going to the operating room and to explain that, when he wakes up, he will be back in the recovery room, on a stretcher, with an IV in one arm and probably experiencing pain. The patient must be assured that pain medication will be available in the recovery room. His vital signs will be taken every 15 minutes as a routine observation. The possibility of the patient's having levine tubes and foley catheters should be explained, depending on the nature of the surgery and the particular physician doing the surgery. The patient must also be informed that he will spend several hours in the recovery room before he is returned to his own room. In the cases of questionable malignancy, it is the responsibility of the physician to inform the patient of the final diagnosis. However, if no malignancy was found, the performer may reassure the patient.

48. Filling out accident reports.

The performer fills out an incident report if something happens to the patient which can or does cause an interruption in the course of the patient's progress. The incident report also protects the performer. If an adverse condition arises several weeks after the incident, the incident is exactly and clearly described and filed. For example, if a patient falls out of bed and hits his head, the performer fills out an incident report and calls the physician. The physician examines the patient and comments on the incident report; then the performer places a copy of the report on the chart and sends the original to the nursing office. After his discharge, the patient may decide to sue the hospital or the nurse; and the incident report is on file for any legal reference. The performer might make out an incident report for some of the following reasons: patient falling out of bed, patient given the wrong medication (this should be done even if the performer does not give the medication himself but discovers on his shift that a wrong medication has been given; when the performer who gave the wrong medication is on duty again, another incident report will be filed).

49. Filling out

a. Stamping lab slips and requisitions

When a patient is admitted to the hospital, a hospital plate is made with all the pertinent information on it (i.e., name, address, next of kin, date of birth, unit number, telephone number, insurance coverage, service and the name of the doctor). This plate is kept next to the Pitney-Bowes duplicating machine on the nursing unit. Requisitions for lab work are kept in a metal container next to the plates. There are specific requisitions for Hematology, Urinalysis, Chemistry, Blood Bank and General Use. The performer selects the correct slip and places this over the plate in the Pitney-Bowes machine. The knob or stamping arm on the machine is slid over the requisition, thereby producing a duplicate of the information on the plate. The requisition is then marked with the date, the doctor's name and the appropriate test. This is placed with the specimen, which the doctor labels himself.

Requisitions: Requisitions for X-ray and EKG are kept in alphabetical order on the chart holder. The performer takes the requisition and stamps it at the top with the patient's plate.

b. Making necessary arrangements for X-rays, lab work.

For X-rays the performer stamps a cardboard requisition with the patient's plate and attaches this to the stamped requisition. This requisition is then sent to the X-ray department where it is logged and an appointment is given. The X-ray department will call the nursing unit to give the date of the appointment. The performer takes this information and writes it in the Kardex under the patient's name.

Laboratory specimens are taken to the laboratory, stamped in at the time clock and deposited in the refrigerator or given directly to the technician. If the work is routine, it is put in the refrigerator; if it is STAT, it is handed directly to the physician.

Note: Lab work which is done outside of the building needs a requisition number from the IBM office. The performer stamps a cardboard requisition, Form 116, and takes this to the IBM office with the name of the desired test written on it. A number is given and written on the requisition. The performer returns to the nursing unit and calls the outside agency to make an appointment for the test. This is recorded in the Kardex with the date and time of the examination. Arrangements are then made through the admitting office for transportation on that day. When the ambulance arrives, the driver is given the stamped requisition with the number on it.

Tests of this type include: brain scans, lung or liver scans, thyroid work-ups, EEG's.

50. Checking and posting orders in MD order books.

The performer reads the order which the physician has written and signed. In the column to the right of the order, the performer signs his initials in red pen, acknowledging that the order has been seen and acted upon. If the order is a medication, the performer signs his initials, takes the color-coded medication card from the box on the nurses station and makes out the card with the patient's name, the name of the drug, the dosage, the route of administration and the intervals at which the drug is to be given. The performer double checks the card with the order, turns the card over and initials and dates the back of the card. Next to his initials in the order book, the performer indicates the date and time the drug was started. The performer then turns to the medication Kardex and writes under the appropriate columns the date the drug was ordered, the name, dosage and route of administration of the drug, the interval of the drug and the hours the drug is to be administered. If the performer gives the initial dose of the drug, he then signs off the time with his initials in the medication Kardex.

51. Checking off diet manual each shift.

The dietary department performer brings the diet chart to the nurses station with each meal. The performer takes the chart and checks it against the patient Kardex at the nurses station. New admissions' names and diets are added, discharges are deleted, and changes are noted. Patients on X-rays for the day or in the operating room are placed on NPO (nothing by mouth) until the order is resumed for the earlier diet. If questions arise, the performer checks the diet order in the doctor's order book.

52. a. Recommending (or)

Consultations are ordered by the physician in charge of the patient. The private physician can either use the medical resident on consultations for the month or he may specify another private doctor to serve as the consult. In any case, the doctor writes an order for the patient to have a medical consult done and specifies whether it is to be the resident or another private doctor. The physician then fills out a consultation request and places it on the patient's chart with a brief history.

b. Arranging for a consultation with medical specialists , social services, psychiatry, etc.

The performer then calls the consulting doctor, be it resident or private doctor, and tells him the name of the patient, the admitting diagnosis and the name of the doctor requesting the consult. The performer then writes next to the order in the order book that the consulting doctor has been notified, along with the date. The performer informs the patient that sometime within the next day or so another doctor will be coming to see him; he tells the patient the doctor's name and briefly that the first doctor in charge requested the consult.

Social service: The performer calls the Social Service Department, gives the patient's name and admitting diagnosis and asks that a social worker see the patient. It is a good idea for the performer to explain to the social worker why the patient needs to be seen. For example: the doctor may want the patient sent to a nursing home: the performer may find out that the patient is upset because he has no hospital insurance because he has six children, is out of work and is worried about how he will pay his hospital bill.

Psychiatry: The doctor writes an order for a psychiatric consult and fills out the consultation form. The performer then calls the psychiatrist on call and informs him of the consult. The performer may or may not tell the patient a psychiatrist is coming but should tell the patient he will be visited by a new doctor.

53. Assigning and coordinating nursing activities, including making out daily assignment sheet.

There are many variables involved in the judgment of coordinating activities and making out an assignment sheet. The patient census, the types and conditions of these patients, the number of performer personnel involved, and the different levels of performer personnel must be taken into consideration. The particular shift is a variable, in terms of tasks that are performed on the 7-3, 3-11 or 11-7 shifts. The level of the performer making out the assignment sheet and coordinating the nursing activities is also a factor.

Coordinating nursing activities may also depend on whether the X-ray department has its own transporter, whether the operating room has its own transporter, whether it is a holiday or a weekend. The performer uses his own judgment in terms of assigning patient care and assessing the needs and skills of the individual performers. Team conferences on a particular patient can be structured or informal, on a weekly or an impromptu basis. The other performers on the nursing team must have the feeling that their thoughts and ideas are valuable and acted upon, whether in a group or individually. Morale is important in coordinating nursing activities. Team conferences on in-service education can be structured or impromptu, and the other performers on the team should be encouraged to participate in the planning and the running of the nursing unit.

54. Evaluating quality of nursing care.

The most important factor in evaluating the quality of nursing care is common sense. Some of the conditions on which an evaluation is based are as follows: common sense, judgment, scientific knowledge and its application in terms of patient care, the ability to establish priorities, organizational skills, completion of assigned duties, emotional support to patients and their families, seeing patients as individual people, anticipating patients' needs, empathy (not sympathy), understanding patients' feelings and helping them to understand their own. There is presently no written, formal evaluation of personnel.

55. Observing nursing care and visiting patients regularly to ensure proper nursing care.

The performer should make rounds daily on the nursing units, read the patients' charts, make rounds with the physician when ever possible, attend conferences, and structure conferences on a particular problem or procedure with members of the nursing staff on a particular unit, when applicable. Nursing care can be observed in terms of progress, a patient's attitude, and the feelings that are expressed. When a patient sees an administrative-level performer daily, he has a feeling of confidence because he knows that someone is watching over the performer who is caring for him.

56. Regularly inspecting rooms and wards for cleanliness and comfort.

The performer observes the cleanliness of rooms and wards when she makes her daily rounds to all the patients. Comfort would be noted in the statement above in patients' attitudes toward their surroundings and the progress of their illness. The easiest and most accurate method of inspection would be for the performer to have all five senses acutely attuned to her surroundings at all times and to follow through on the leads she is given from patients' remarks.

57. Accompanying physicians on rounds.

Depending on the level of the performer, this function will vary. For example, the role of the charge nurse accompanying the physician on rounds will be different from the staff nurse accompanying the physician on rounds. The head nurse retains all the pertinent information about the patients: when their X-rays are booked, if their lab results are on the chart, whether the patient had a comfortable night, any sudden change in the patient's vital signs or condition while she was not there, the amount of IV absorbed in the last 24 hours, the amount of drainage from tubes or catheters, the amount of drainage from a wound (whether it has increased or decreased). The appropriate performer accompanies the house staff on rounds to relay any pertinent information she may have and to be a part of the team approach to total patient care. In this way, she also learns the physicians' plans for a patient. The private physician usually comes in once a day or every other day and usually seeks out the head nurse for any pertinent information about his patient since his last visit.

58. Investigating and adjusting complaints.

The nature of the complaints that can be adjusted by a performer depends on the level of that performer. The majority of patients do not complain, and those who do generally have legitimate complaints. However, when people are ill their defenses are down, and they are usually more susceptible to misunderstandings. What they would have overlooked had they been well, they do not overlook when they are ill. For example, a particular patient may have had to wait an hour for the performer to return when the performer said he would return in 10 minutes. Therefore, the patient complains that he was forgotten for an hour and that he kept calling and no one came. The investigating performer follows through on the complaint and finds that in the meantime there was a cardiac arrest on the nursing unit, and the performer felt the need to remain with the acutely ill patient instead of returning to the first patient. The investigating performer tells the performer that the patient complained because he was gone for an hour when he said he would return in 10 minutes and the performer is asked how he feels about being reported for this. The performer expresses his feelings and through discussion is led to understand that, if the patient did not know there was a cardiac arrest, how was he to know that the performer had not simply forgotten him? The incident and the results of the discussion are then relayed to the patient.

59. Supervising preparation and maintenance of patients' clinical records. Patients' clinical charts are routinely checked for completeness and accuracy. The performer reads the charts from day to day to check lab results and the progress notes of the physician. At this time she also checks the clinical charts to note the stability of the patient's vital signs. If errors are obvious, the performer mentions this to the appropriate person.

60. Giving change -of-shift report.

Prior to giving the report, the charge nurse makes rounds to all the patients to check their IV's, their I&O sheets, any drainage tubes, the comfort of the patient and the appearance of the nursing unit. The performer uses both the patient Kardex and the Doctor's Order Book in giving the report. The Order Book is used to relay any new orders that have been written and serves as a double check to make sure that all new orders have been posted.

Any change in a patient's condition is reported to the performer taking the report; he is also informed of the number of times a patient had to be medicated for pain, fluid intake, fluid output via all channels, new admissions, discharges and transfers. Every patient is accounted for. Some performers prefer to make "walk rounds" after the verbal report has been given to double check on IV's and so on.

65. Caring for a mother in labor:

a. Admitting patient

This patient is usually a spontaneous admission to the nursing unit, The performer greets the patient, makes out a clothes slip, and asks the patient's husband to sign that all the clothes are taken home (this is done because the patient is not in the Labor Room very long;

and when transferred to the post-partum floor, she will not be able to wear the same clothes home). Otherwise, the admission procedure is the same as on the other nursing units.

b. Obtaining necessary information from patient

When the patient is admitted, her clinic record will be pulled from the files in the Emergency Room, and the necessary medical history will already be available. If the patient is private, the private doctor is already on his way into the hospital, bringing the medical information with him. If the patient has never received any pre-natal care, the performer must obtain a nursing medical history. This includes: STAT type and cross-match for one unit of blood to be ready and a STAT hematocrit. The patient is then questioned in terms of how many other viable children she has, how many pregnancies she has had in relation to the number of viable children. A detailed history of other pregnancies is obtained, including history of pedal edema, any previous abortions, any surgery, if the patient is presently on any drugs, past illnesses, history of dizziness, any history of hypertension. It is important to ask all patients if their membranes have ruptured; and, if so, how long ago and how frequent their contractures are. If the patient's membranes have ruptured and she has never received any pre-natal care, a vaginal culture is taken (if positive the baby will be isolated); the patient is usually started on antibiotics immediately if the membranes have been ruptured over 24 hours. The performer also asks the patient if she intends to breast-feed the baby.

c. Checking vital signs and fetal heart frequently

The performer takes the patient's vital signs, noting if there is an elevated temperature or hypertension. The performer takes the fetoscope and listens to the fetal heart. This information is then recorded on the Labor record at the nurses station.

d. Prepping patient, giving enema

On admission the physician is called and he will give the orders for the perineal prep and the cleansing enema. In the labor room the performer will find the disposable prep tray, disposable bottles of phisohex, disposable chux and disposable paper gloves. The performer assists the patient into the dorsal recumbent position and opens the prep tray between the patient's knees. The chux are placed underneath the patient's buttocks, and the phisohex is poured over the perineum. The performer puts the gloves on and preps the perineal area thoroughly. The performer then gathers all the equipment in the chux and discards it in the waste basket. The performer also obtains a disposable enema set-up. The performer opens the enema bag and prepares the solution (refer to Function #27). The performer then places more chux underneath the patient's buttocks and asks her to turn on her left side. The rest of the procedure is the same as in Function #27.

e. Providing emotional support.

During this time, the performer has had time to evaluate the patient by talking with her. She must find out the patient's attitude toward this pregnancy, whether the patient is married or single, if single, whether she is keeping the baby or giving it up for adoption; if she is keeping the baby, why (so that it won't feel rejected the way she was when the father found out she was pregnant?), to punish herself and devote her life to this child? The performer must understand the anxiety and feelings if it is a first baby; the patient may be frightened because she doesn't think she can cope with a child. Helping the patient to express her feelings during this time period will result in a more cooperative patient.

66. Assisting in delivery room:

a. Assisting in transferring patient to delivery room, and positioning, securing and draping patient as necessary on table

When the physician has decided that the patient is fully dilated, the performer tells the patient that she is going to be taken to the delivery room. The performer makes sure the side rails on the bed are up and then pushes the patient's bed into the delivery room. The performer positions the bed next to the delivery table, lowers the side rail and asks the patient to slide over onto the delivery table. If general anesthesia is to be used, two performers are needed to place the legs in stirrups simultaneously; if both legs are not raised at the same time, there is a possibility of rupturing a femoral ligament because, due to medication, the patient's limbs are very pliable. The patient is draped by the physician. If local anesthesia is to be used, the legs are not put in the stirrups until after the anesthesia has been given. The performer opens the prep tray for the perineum. The tray contains two sterile cups, two double ring prep sticks and eight pledgets. If the patient has received general anesthesia, the cups are filled with tincture of Zephiran or Betadine solution. If the patient has received local anesthesia, the cups are filled with aqueous Zephiran. The performer takes one of the cups and one prep stick and, with one pledget, dips into the cup and wipes the left side of the perineum. The performer discards the pledget in the kick bucket on the floor. The performer repeats the process and wipes the right side. The performer repeats the process and wipes directly in the center with a downward motion. The entire procedure is repeated with the second cup and the second prep stick. There are two pledgets remaining; both are dipped into the second cup - one is wiped down the left thigh, the other, down the right thigh. The remaining liquid in the cup is poured over the perineum. The doctor now drapes the patient.

b. Setting-up delivery room

The performer sets up the delivery room before the patient is admitted to Delivery. The performer goes to the utility room and gets one sterile disposable drape pack, one sterile disposable gown and towel pack, and one sterile instrument pack. The gown and towel pack and the instrument pack are placed on the delivery table itself, and the outer wrapping is opened. The sterile drape pack is placed on the back table and the outer cover opened.

The performer then puts on a cap and mask, opens a pair of sterile gloves, taken from the shelf in the delivery room, and puts them on. The sterile portions of the drape pack are then opened and put on the back table. The instruments, gown and towel from the delivery table are opened and placed in order on the back table. In the delivery room the performer obtains two packages of 4" x 4" sponges, 15 per pack, a sterile French catheter (#14 French), and a sterile Bulb ear syringe, 3oz.; these are opened and placed on the sterile field. Inside the drape pack is a sterile cover which is opened and placed over the entire back table. The performer then removes the gloves and disposes of them in the kick bucket on the floor.

c. Directly assisting doctor as necessary

When the patient is brought into the delivery room, the performer again puts on a pair of sterile gloves and opens or uncovers the back table. From the shelf in the Delivery Room, the performer obtains and adds to the sterile field a pair of sterile gloves for the doctor and a package of absorbable sutures for the episiotomy (usually triple O or double O Chromic). The performer then obtains the eye kit for the baby, which consists of a sterile eye syringe, medicine glass, sterile water and an ampule of silver nitrate. The performer also prepares .25cc of Aqua Mephyton IM for the baby. When the baby's head is delivered, the performer gives the patient pitocin IV, and when the placenta is delivered the performer gives the patient metherqine IM. If the patient is not breast feeding, the performer gives Deladumone IM to the patient.

d. Receiving baby from doctor, place in heated crib

When the baby is delivered, the doctor clamps the umbilical cord and if the mother is awake, she is shown her baby. The doctor then hands the child to the performer who places the child in the heated crib in the delivery room. The child is placed with the feet elevated, thereby allowing for free drainage of the lungs. The child is wrapped in the blanket, which is in the heated crib.

e. Giving suction and oxygen as necessary

The child is suctioned and given oxygen as necessary with the emerson resuscitator at the head of the crib.

f. Putting silver nitrate in eyes of baby

The performer takes the eye syringe and washes the eyes with sterile water. The performer then punctures the silver nitrate vial with a pin and instills one drop in each of the baby's eyes, and again washes the baby's eyes with the sterile water.

g. Clamping umbilical cord

This is done by the doctor during the baby's first physical examination. The performer checks the clamp to make sure it is secure and not bleeding.

h. Measuring baby, taking footprints

The performer takes the disposable tape measure at the head of the crib and runs it from the sole of one foot along the lateral aspect of the baby, up to the head, and records the measurement. The performer takes the stamp pad and rubs it on the soles of the baby's feet, and then makes an imprint with the feet on the baby record.

i. Cleaning up both patient and used equipment, instruments afterward

The disposable equipment is gathered and taken to the trash receptacle outside the delivery room door. The instruments are taken to the utility room and washed with soap and water, and then placed in the basket to go to Central Supply to be autoclaved.

After the physician has left and the patient is sleeping, the performer washes the patient's perineum with aqueous Zephiran.

Sterile peri-pads are taken from the container on the shelf and put on the patient. The patient is covered with a sheet and the fundus is rubbed.

j. Other.

The performer notes the time of the delivery of the head and the delivery of the placenta. This is recorded on the patient's record and the baby's record. There are three tags which are necessary for identification which the performer finds at the nurses station. The mother's name, sex of the child, date and time of delivery, delivery unit number and name of the doctor are written on these by the performer. Before they are attached, they are double checked for accuracy by another performer. One is then put on the mother's wrist, one on the baby's wrist and one on the baby's ankle. When the baby is footprinted, the thumb print of the mother is also taken and put on the baby's record as another means of identification.

67. Caring for newborn:

a. Moving baby from delivery room to nursery

The baby, still wrapped in the blanket, is taken from the heated crib and placed in the Armstrong incubator and wheeled to the nursery. The child's record is taken along and given to the performer in the nursery.

b. Washing, diapering

On admission to the nursery the baby is weighed, and the weight is recorded on the child's record. The child is then transferred to another Armstrong incubator for heat and given a bath with a disposable bottle of phisohex. The cord is wrapped in an alcohol sponge and covered with a dry 4" x 4" sponge. Diapers and a baby shirt are put on the infant and he is observed for respirations, color, crying and activity.

c. Feeding

For the first 12-24 hours the baby is NPO (nothing by mouth): then he is started on glucose and water. The sucking reflex is present at birth, and the infant will suck on the nipple.

d. Teaching mother how to breast-feed, bottle-feed, bathe and generally care for baby.

Breast-feed: The performer teaches the mother the care of the nipples and assists her in positioning the baby so that the infant will suck and will be able to obtain the milk from the mother's breast.

Bottle-feed: The performer must make sure that the baby is clean, dry and comfortable before feeding. In the beginning the infant will not take the full amount of formula, but it is important that the mother become accustomed to holding the baby and that she has an objective point of view with feeding the baby. The neck of the baby is supported and the nipple is gently rotated in the mouth to stimulate the sucking reflex. When the infant begins to suck the mother can stop rotating the nipple. After the infant has taken about a half an ounce of formula, the mother should support the child in an upright position over her shoulder and gently pat its back, thus causing the infant to emit any air bubbles (or burp).

The infant will sleep most of the day and usually only awaken when hungry or wet. The mother should be aware of the types of stools to expect, how to make the formula and how much formula the infant will take.

When bathing the infant, the mother should use tepid water and should never release the infant when he is in the water. Children are very slippery when wet. The infant should not be immersed until the cord falls off, which is usually about one week after birth.

68. Caring for mother after delivery:

   a. Encouraging mother to get up, take showers, force fluids, etc. After delivery, the mother should be proud that she has given birth to a normal healthy baby. This would not have been possible unless she herself had been healthy. The mother is therefore encouraged to keep healthy by taking warm showers and eating a full meal. Fluids are important as well as wholesome food.

   b. Checking perineum sutures, breasts, fundus and flow of patient. The patient should be assisted to the dorsal recumbent position and the perineal sutures examined for swelling and bleeding. The fundus should be rubbed frequently and kept about two fingers above the umbilicus. The breasts should be hard but not red and hot. Any abnormalities should be reported to the physician at once. The flow should be moderately heavy, with few clots. If the flow is scanty, the fundus should be checked to make sure that it is tight and low, and in the center of the midline. If it is high, the fundus could be full of clots. The patient is taught how to examine her own breasts, how to keep the fundus firm; she is instructed to report any abnormalities and discomforts to the performer immediately.

69. Preparing babies or children for afternoon naps, including:

   a. Bathe them

   b. Change diapers

   c. Giving them bottle, if applicable.

After lunch the performer pulls the shades and puts the children back to bed. Their hands and faces are washed and pajamas or diapers changed if necessary. Any toys that must be slept with are put into the crib, and toddlers are given a bottle of juice. Some children up to two or three years of age are given a bottle of juice or milk to help them to fall asleep.

PSYCHIATRY DEPARTMENT PERSONNEL

REGISTERED NURSE, PSYCHIATRIC ATTENDANT

1.
   a. Answering telephone
   b. Taking messages, notifying appropriate personnel
   c. Giving information or directions
   d. Making phone calls.

   Refer to Ward Secretary Appendix, Functions #9, #10 and #11.

   The performers tend to be especially guarded in giving information about patients over the telephone. People frequently call to find out how the patient is, or, perhaps, what makes him behave the way he does. To such questions only the most general answers are given, and the person calling is urged to come to visit the patient.

2. Taking and recording:
   a. Temperature
   b. Pulse
   c. Respiration rates
   d. Blood pressure
   e. Weight.

   Refer to Nursing Appendix, Function #24.

3.
   a. Collecting urine specimens
   b. Taking specimens to lab
   c. Taking patient to X-ray.

   Refer to Nursing Appendix, Functions #19a and #11.

4. Admitting new ward patients.

   The admission procedure depends largely on the patient's condition. If he is not acutely ill, he is taken to the Admitting Office, where he gives the necessary information for his addressograph plate (i.e., name, address, telephone number, unit number, next of kin, type of service and so on) and information for billing procedures. Most important of all, he signs a "voluntary," the form by which the patient takes responsibility upon himself for his admission, thereby releasing the hospital from responsibility for any accidents which might occur. The acutely ill patient is not taken to the Admitting Office for fear that paranoia or agitation would only be aggravated. Instead, an admitting clerk comes to the ward to obtain the information; or a performer might be asked to obtain the information; or a friend or relative is asked to supply the information. The patient must still sign the "voluntary;" however, with recalcitrant or disorganized patients, a performer may persuade, cajole or entreat the patient for quite some time before he will sign (should the patient still refuse to sign, the plans to admit him are cancelled). The patient's chart is assembled, including all necessary forms: progress note forms, doctor's order sheet, X-ray requisition, clothes sheet and lab work sheet. The clothes slip is completed; initial vital signs are taken and recorded; and an intern is notified to come and take the medical history. The patient is familiarized with the ward, its facilities and other patients. Depending on his condition, he is told about the schedule of ward activities (including group therapy sessions, meals and visiting hours) and what is expected of him in terms of restrictions.

5. Assisting in transferring patient to or bringing patient from another floor. The transfer procedure is the same as that on other wards in the hospital in terms of arranging for and carrying out the actual transfer (refer

to Nursing Appendix, Function #12). However, greater care must be taken in explaining to the patient why he is being moved and what the new ward will be like, as well as notifying roomates (if any) on the other floor of the patient's arrival. If a patient is being transferred from another floor of the hospital to the psychiatric ward, many of the functions listed in #4 above are carried out to help the patient to adjust to his new environment. Note: If the patient is being transferred to another institution, it is particularly important that the patient understands why he is being moved and what the new institution will be like.

6. Doing errands for department staff:
   a. Going to Central Supply

      The performer obtains a properly filled out requisition slip, goes to Central Supply, rings the bell and stands outside the door while the supplies are collected for him. If the quantity is large, a shopping basket may be used to transport the items back to the ward.

   b. Going to laundry

      Not done by performers from the Psychiatry Department.

   c. Going to various departments or floors to obtain equipment, supplies.

      If this ever has to be done, the performer calls the other department or floor to see if they have the materials needed and then simply goes to the other floor to pick them up.

7. Maintaining daily or weekly progress notes on selected in-patients and out-patients.

The performers are expected to maintain regular progress notes on the patients assigned to them. The following kinds of information may be considered in writing progress notes:

a. Mental status: How are the patient's reasoning faculties? Is he hallucinating? How is his memory function? Are there issues about which he finds it difficult to talk? Is he paranoid? Does he make nonsensical connections between events or objects in his life?

b. Affect: Is the patient depressed, angry? What are his feelings, his "mood"? Is the affect appropriate? Is there real cause for his particular mood? Are his ways of expressing the affect appropriate? Is he, for example, taking out his anger on people who are not the cause? What changes have there been in his affect?

c. Behavior: Is the patient's behavior appropriate? Is he keeping himself clean, well-dressed and making minimal efforts to be social? Or is his behavior bizarre (e.g., taking off his clothes in the corridor) or neurotic? How does he relate to others? Does he get up and leave a group when a particular issue is being discussed? Does he try to hurt other patients?

d. Issues: Are there new incidents affecting the patient's condition; e.g., a new family problem, an argument with a staff member or another patient that visibly upset the patient, or specific incidents of "acting out" (such as self-mutilation or drug usage on the ward)?

What insights have been developed into the reasons for a patient's feelings of loneliness, for example, or his angry, self-destructive behavior? Was some new information about the patient revealed through an interview with his family or friends?

e. Plans: What practical, realistic plans is the patient making for himself? How is his work going? How is he getting along with those with whom he lives? Included in this category are discharge plans, which may involve a new job, a new place to live and so on. What sort of follow-up care is best for the patient being discharged? Notes may be written in the Communication Book on patients other than those assigned to the performer; this is usually done only when the performer observes or hears something which he considers particularly significant.

8. Talking with patient's family casually or professionally, helping them to understand patient's condition, feelings, progress, problems, therapy.

Casual conversation with a patient's friends or relatives can often give insight into the patient's troubles, and it often makes the friends or relatives feel more at ease. Such conversation may take place anywhere on the ward, in the presence of the patient or not. When the talk is more "professional," the performer and the family will arrange a specific time to meet and sit down in one of the private rooms available for talking, conducting themselves in a more detached manner. In either case, the goals of the conversation are to share information and to explain treatment, to allow a family to talk freely about the patient's being in the hospital, to help them understand the patient's behavior and to help them decide how to best interact with the patient at that time.

There is a strong sense of privacy of the patient's life, and the patient's problems are not communicated to friends or family unless the patient so desires; and then, the patient is asked why he doesn't communicate the information himself. It should also be mentioned that patients have the right to refuse visitors; the performer may simply tell the visitors that the patient does not feel like seeing them.

9. a. Knowing where any ward patient is at any given time

The performer walks around the ward, checking rooms, seeing who is obviously there, and checking the sign-out sheet to see who has gone out (this involves knowing who has permission to go out, for how long, and who doesn't).

If a patient cannot be located or accounted for, the performer notifies the physician in charge; depending on the patient, the performer may also call the patient's home or the police.

b. Checking on his condition casually or formally and frequently (as with a suicidal patient).

Patients who need to be watched (because they are suicidal, because they may try to escape or because they are so disorganized that they are unable to take care of themselves) are checked routinely every fifteen minutes. The performer may simply check on the patient's whereabouts or he may hold a brief conversation with the patient or observe him interacting with other patients. The interval of observation may be shortened as necessary to ten minutes or five minutes; some patients are so suicidal that they must be "specialed," which involves sitting with the patient steadily for periods of an hour or more.

10. Supervising, evaluating and making recommendations about a patient with "outside hospital" privileges.

When the patient first receives "outside hospital" privileges, the performer makes sure that he understands how much time he can be outside and reminds him that, unless specifically excused, he should be in the hospital for certain activities (e.g., group therapy, doctor's appointment). The patient is asked about his destination and his companions, and he is given his medications if he will be away when medicine is handed out. Patients are instructed to sign in and out at the nurses station.

In evaluating the patient's handling of outside privileges, the performer considers a number of factors: whether the patient returned within the time granted or was late; whether the patient was nervous outside, whether he was glad to be back or whether he would have liked to have stayed out longer; what the patient did (for example, did a patient who was first admitted for attempting suicide spend his Saturday afternoon parachute-jumping instead of at home with his family, as had been agreed upon with the doctor?). The performer reports how the patient appeared when he returned to the ward. If the patient was extremely upset, for example, the performer would talk with the patient to try to learn why. The performer might then recommend that the patient be allowed less time out or that his privileges be revoked until his condition improves.

11. Observing and reporting to Head Nurse or psychiatrist patient's mood changes, reaction and significant incidents.

    As changes in the patient's mood, reactions or behavior occur, they are reported to staff members (including psychiatrists, nurses, and attendants) either informally in discussions or more formally in the morning report or in the Communication Book. For the kinds of things that the performer would observe and report, refer to Function #7.

12. Assisting in planning a specific therapy for a patient.

    a. In planning a specific therapy for a patient, factors such as the followinc are considered:

        (1) The condition of the patient at the present time, and how he has improved or regressed since hospitalization.

        (2) How much family and friends can be counted upon to support the patient.

        (3) How well he can take care of his needs in his condition, including how much responsibility he can take for his actions.

(4) What the most pertinent issues to be discussed and decided upon with the patient are (both from the patient's and the staff's viewpoint); and what issue or issues should not be discussed.

(5) What other agencies should be involved (in the therapy), if any.

(6) Who the therapist should be and how other staff members can act consistently with the line of therapy chosen.

The therapist for a patient can be chosen by either the head nurse or the chief psychiatrist, or staff may be asked to volunteer. First, the ward chief gives a brief description of the patient and roughly outlines his own idea of the appropriate form of treatment. The choice of a therapist depends on his or her particular skills, experience and abilities as related to the patient's needs, on the therapist's availability (e.g., the performer may be carrying a full patient load), and on the nature of the patient's problems (some patients may specifically require a male or a female therapist; for example, a young female whose history is notable for the absence of any respected female authority figure may need a female therapist who will serve as such a figure).

b. Implementing the plan

The performer discusses the plans with the patient at the appropriate time (for example, if it's about discharge), decides with others what is the most efficient and consistent approach and maintains that approach, and takes responsibility for communication about the patient from shift to shift. Performers may assist each other in implementing therapy. For example, the therapist may ask another performer to discuss such issues as appropriate dress and behavior in public. Or, in setting limits with an adolescent boy, the staff may be told to send the boy to his room if he engages in any socially annoying behavior.

c. Motivating or encouraging patient to accept or involve himself in therapy.

This is best done in psychotherapy with the patient, perhaps talking about the patient's reluctance to take more responsibility upon himself. The patient is encouraged to discuss any preconceived ideas which he may have about therapy, psychiatrists and so on. He is told about the positive aspects of getting well and of getting back to home and work. The performer encourages all positive efforts of the patient and helps him to understand and to tolerate his failures.

13. Going to the emergency ward to evaluate a patient

a. First, the performer talks with the medical doctor who saw the patient in the Emergency Room to obtain a short report from him and to ascertain that the medical aspect of the problem has been treated. The performer then takes the patient to a private room and interviews him to obtain the following information:

(1) Acuity and chronicity of illness

(2) Social, family and work histories

(3) Information about present situation: living arrangements, family relations and so on.

(4) Mental status, including degree of psychosis if any, suicidal tendencies and so on.

b. Notifying psychiatrist and discussing results with him.

Having satisfied himself to some degree that the patient is or is not suicidal, or does or does not need psychiatric care, the performer then telephones the doctor on call, describes the patient and offers his own conclusions. The doctor usually comes to interview the patient, in which case the performer will try to remain with the doctor and patient, time permitting; in some instances, however, the doctor may give his conclusions and disposition verbally over the phone. If the patient is not going to be hospitalized, the performer stays with the patient while he waits for an ambulance or relatives to arrive. The performer may also call other people, such as a local medical doctor, family or social worker, where indicated.

14. Assisting patients with occupational therapy.

Occupational therapy tends to be spontaneous, infrequent and unsystematic. However, the performer may try to draw out a withdrawn patient by encouraging him to paint, model clay, play cards or put together a jigsaw puzzle. This may also serve to rechannel the energy of a nervous patient.

15. a. Carrying out individual therapy with patient

The performer first meets with the supervisor to decide how often he will see the patient and for how long. Secondly, the performer schedules appointments with the patient, trying to make them as regular and as consistent as possible. In the first sessions, the performer assesses the patient's status, tries to obtain a fairly inclusive history and tries to establish a good rapport. The performer then proceeds to discuss such issues as interpersonal relations, immediate and long-term goals, specific issues between patient and therapist (transference issues), and feelings about conditions and occurrences, past and present. The performer tries to find the themes that have run through the patient's life and to help the patient relate them to feelings, incidents and objects in his life (example: never trying certain things for fear of failure).

b. Discussing results, problems and progress with assigned supervisor afterwards.

The performer is likely to meet with his supervisor once a week or as necessary. The performer may present questions of approach to certain problems, or he may give a general description of what is going on with the patient, in which case the supervisor gives him in return specific advice about what to work on, what to select out and what to ignore.

16. Participating in weekly community meetings with all in-patients.

All persons on the ward, including staff and patients, participate in the three weekly community meetings. The purpose of the meetings is to discuss common issues and problems. For example, the group may discuss what kinds of equipment would be best for a new occupational therapy department. Or, they may discuss why a certain patient does not have a certain privilege.

17. Participating in group therapy sessions.

The philosophy of group therapy is that multiple perspectives help a person with his problem. One of the purposes seems to be to discourage imputing magical properties to the psychiatrist by demonstrating, in his presence, that others can also develop insights into a specific patient's problems and that others can provide support to a person who is sick. All patients are required to attend; staff is encouraged to attend also, but they are urged to be consistent in either attending or abstaining. Often, the psychiatrist will begin the session, although most psychiatrists would prefer to play a small role in the group. Patients usually talk to him about what they have been doing or trying to do, although, again, he would prefer that they refer their concerns to each other, thereby allowing him to remain primarily an observer or, if necessary, the controller. What often happens, however, is that there is an unsatisfactory amount of group process (because of the little time that key people can spend on the ward) and little talk about problematic feelings. It is common to find two people dominating the conversation.

18. Responding to a call from any part of the hospital to go there and:

    a. Restrain
    b. Manage
    c. Evaluate a medical or surgical patient.

    When indicated, two performers usually go to the floor that is requesting restraint, management or initial evaluation of a patient. Where possible, the performer tries to calm down an agitated patient and to modify his behavior rather than to physically restrain him. Almost exclusively, medication which the performer may recommend is used to control patients on medical or surgical units.

    Performers are frequently asked to evaluate patients who are difficult for the medical nursing staff to deal with. Suggestions are offered as to what methods may be used to help the patient and staff feel more comfortable. Example: a chronically complaining patient who is constantly demanding staff attention may actually be extremely anxious about impending surgery. Possible solution: a rotating schedule of personnel to care for this patient, thereby alleviating strain on any single staff person. This allows the staff to be less angry and more objective with the patient, and in turn, the staff may be more willing to listen to the patient's fears and anxieties.

    d. Treat a medical or surgical patient.

    Regular visits to patients may be decided upon in consultation with a psychiatrist. Example: a severely depressed patient, seriously burned, may be visited by a performer once per shift if the patient needs frequent reality-testing (to keep him from becoming psychotic).

19. Teaching medical or surgical staff in any part of the hospital how to handle, deal with, react to or help one of their patients. This involves:
    a. Discussing patient's specific case and what it may mean to the patient, involving the staff in specific feelings of patient, aiding them in understanding the dynamics.
    b. Allowing the staff to express their feelings toward a patient and helping them to understand their reactions to patient behavior.
    c. Aiding staff in developing a patient care plan that is beneficial to the patient and relatively untaxing to the staff.
20. Community work.
21. In general, community work is limited to home visits, which are usually made for two reasons:
    a. Emergency: For example, crisis referred to the ward staff by a local medical doctor or personnel from some agency (like Welfare). The situation involves a person obviously and acutely in need of psychiatric help but unwilling to see a staff member in a hospital setting. Example: a young mother dependent on drugs, increasingly unable to care for herself and her family. Intervention may involve hospitalization for her and a foster home for her children.
    b. Regular Therapy: For example: a chronic paranoid schizophrenic who has not left her home for years and who obviously needs both medicine and a consistent therapeutic relationship. The procedure includes making an

appointment in advance; letting all of those involved know that the performer is going to make a home visit; visiting the home and speaking with the appropriate family member or members; and writing notes on the visit upon returning to the ward.

Note: A few performers have begun to do some other kinds of community work. One is trying, with little success, to set up a "drug group" composed of patients who have come through the Emergency Ward for drug abuse. Another is attempting to ascertain mental health needs of Spanish or Portuguese Cambridge residents and may work with such people in short-term therapy.

22. Coordinating psychiatric care of all patients.

This includes: being generally aware of which staff members are working with which patients (both in-patients and out-patients); how each patient is progressing or regressing; how other staff members can be and are supporting the therapy of a particular patient: which patient has what privileges and how he is using or abusing them. It also includes assigning personnel to various shifts (7-3, 3-11, 11-7).

23. Giving approval to any therapy treatment or project.

Therapy treatments and projects for a particular patient are usually planned and implemented by the therapist and his supervisor (refer to Functions #12 and #15). Projects which may affect or involve all of the patients are discussed at the weekly staff meeting. Ideas may be initiated by any performer, but final approval is given by department administration and may be needed from other hospital department as well. For example, at a staff meeting it was decided to eliminate the procedure of performers' accompanying patients to meals in the cafeteria. This had to be cleared with both the dietary department and the nursing supervisor, as well as the psychiatry department administration.

24. a. Functioning as a co-therapist or primary therapist

For a description of primary therapist, refer to Function #15a. The course of psychotherapy is determined largely by the primary therapist in conjunction with his supervisor. It may be necessary at some point in the treatment to "present" or "conference" the patient. In this case, the performer describes some of the patient's history, his present concerns and some of the problems in the therapy; following this there would be a discussion of the patient among staff (attendants, psychiatrists and Nurses).

Co-therapy is seldom used; but when it is, it necessitates consistent and open communication between the two therapists as to:

1. Methods and results of different therapies in regards to certain issues.
2. Sharing new information about the patient.
3. The patient's progress.
4. Transference issues.

Co-therapy may be instituted because a very sick patient might need both a male and a female therapist.

b. Carrying out intensive therapy (as opposed to supportive therapy). Intensive therapy is more intra-psychic, and dynamic issues are discussed. The therapist must be more aggressive and intense, since his aim is to discover the unconscious motivations of sick behavior and to convince the patient of their reality. The therapist, acting as an interpreter, tries to heighten the patient's understanding of himself and to apply his insight to his problems. In contrast, supportive therapy is more the listening and encouraging kind of therapy. The patient uses the therapist as a sounding board, a friend, a listener, a trusted object and a helper in decision-making problems. Supportive therapy is characteristically less dynamic than intensive therapy, and the goals are more limited and superficial, involving more practical issues of day-to-day life such as finding a job or a home.

25. Evaluating quality of work done by nurses and attendants.

Such evaluations are generally informal and may be based on factors such as the following:

(a) Interest, enthusiasm, willingness to learn.

(b) How well a performer interacts with patients in one-to-one or group settings; what kinds of patients, if any, he works best or most poorly with.

(c) How well an individual uses teaching conferences, supervision and other teaching opportunities. Does he inquire if he doesn't know; does he look for chances to learn?

(d) Promptness, ability to work well with other staff members.

(e) Reliability and judgment - are there any tasks he cannot be trusted to do? Example: can he be left alone on the ward?

(f) Whether he likes the work, and whether the patients like and trust him

26. Investigating and adjusting complaints and problems.

The nature of the complaint or problem determines which performer handles it. Problems range from complaints about cafeteria service (late or cold food, lack of refreshments in the refrigerator) to a faulty appliance on the ward, to staff and to administrative problems.

27. a. Developing plans for the expansion of the department

This is done in conjunction with other staff members in formal or informal meetings. Suggestions are solicited and considered; final decisions are made by administrators. Performer may also help to establish mutual aid programs with outside agencies (example; the police). Developing plans for the expansion of the department may also include adding more staff, expanding the bed capacity, redecorating the ward, altering existing services or adding new services.

b. Participating in administrative meetings concerned with hospital problems or policies.

There is a weekly scheduled meeting for department head and administrato for purposes of presenting and discussing issues which affect the whole hospital, for keeping departments informed of developments in other departments and for working out interdepartmental problems.

31. Other functions:

a. Administering medications.
See General Nursing Appendix #38a.

b. Giving change-of-shift report.
See General Nursing Appendix #60.

c. Straightening up the area.
See General Nursing Appendix #1.

d. Giving routine morning care.
See General Nursing Appendix #20.

OPERATING ROOM PERSONNEL

REGISTERED NURSE, SURGICAL TECHNICIAN, NURSES AIDE, ORDERLY

1. Clean the following:

   a. Dirty workrooms
   c. Halls

   Cabinets, laundry rack, trash buckets, drawers, walls and storage areas under the counter are washed weekly with mixed sanidril. The hopper and its fixtures, the counter tops, the tops of the cabinets, the autoclave, the ultrasonic washer, and the two sinks and fixtures are washed daily with mixed sanidril. The floor is washed daily with Micro-Bac and water. The bucket which contains Cidex is emptied and washed out every two weeks, and a new batch is mixed and put into the bucket. The bucket is covered and dated (Once Cidex is activated, it is only effective for two weeks).

   b. Lavatories

   The sinks and showers are washed with Ajax. The floor is washed daily with Micro-Bac and water. The linen rack and trash buckets are emptied and washed weekly. New linens are placed in the buckets and clean laundry bags are put on the racks daily. Paper towel, soap, and toilet paper dispensers are replenished daily. The hoppers are cleaned daily with johnny mops and cleansers.

   d. Lounges

   The table tops, dirty dishes, coffee pots and floors are washed daily. Scrub uniforms are kept neat in the proper cabinet according to size. Disposable caps, masks and boots are replenished in the cabinet daily. The refrigerator is defrosted monthly and washed inside with an ammonia solution.

e. Litters.

The linen is removed from the litter and discarded in a hamper. The complete litter is then washed down with mixed sanidril and left to dry. It is then remade with one full sheet, which is tucked in covering the mattress, and one half sheet, which is folded in half and placed in the middle of the mattress. The sides of the half sheet are fan-folded up onto the top of the mattress.

2. a. Clean operating room area and equipment

c. Remake room for next operation

Routine Cleaning Procedure After Clean Surgical Case

All linen is discarded into the linen hamper. All trash is collected in paper bags, which are then placed in one large plastic bag and thrown down the rubbish chute. Water or saline is run through the suction tip and tubing; the bottle, tip and tubing are then placed separately on the instrument table. Blades removed from knife handles are placed in a suture packet and covered with tape or placed in an IV bottle. Dirty instruments, with rachets fully opened, are placed in an autoclave tray, with delicate instruments kept separate from dirty instruments by placing them in a separate instrument tray. Unopened suture packets are also kept separate and are placed in a designated box to be returned to the manufacturer for resterilization. Basins, light handles, needle trees, labeled specimens and asepto syringes are placed on the instrument table.

The instrument table is then taken to the dirty work room and dismanteled. Dirty instruments in the instrument tray are placed into the ultrasonic washer. All other dirty equipment is placed on the left side of the counter. The clean instrument tray and clean equipment are placed on the right hand side of the counter. Suction bottles are emptied into the hopper, rinsed and filled with water; the labeled specimen is put into the refrigerator. The O.R. memo and patient charge cards are brought to the front desk. The instrument table is brought back to the room.

All furniture in the operating room is wiped down with mixed sanidril, and the floor is washed with Micro-Bac and water. Then the mop head is discarded down the laundry chute, and the bucket is dumped and refilled for the next case. The linen bag, suction bottles and tubing are replaced. Two paper bags are clipped onto the anesthesia table, and one is put in the kick bucket. The O.R. table is remade with clean linen, and the furniture is put back in order.

Cleaning Procedure After Septic Case

Definition: Septic cases are operations involving pus, gangrenous areas or the presence of colon bacilli, tuberculosis, typhoid or any other infectious or contagious disease organism.

Equipment Needed

Plastic laundry bags, plastic trash bags, sheets (at least four), basin of mixed sanidril with towels, bucket of mixed sanidril and scrub brush, instrument trays, autoclave tape, string, mat and two pieces of tape with "septic case" written on them.

Procedure

A cleaning procedure similar to that which follows a clean surgical case is carried out, except that extra precautions must be taken to ensure aseptic conditions. The scrub, the performer who is gowned, gloved, masked and has washed (using scrub technique), remains in the room and hands equipment and instruments through the door to the circulator, the performer who has removed her cap, mask and gown. The suction tip and cap are removed and soaked in mixed sanidril, and the outside of the bottle is washed with sanidril. The tubing is thrown out; and the bottle is given to the circulator, who takes it to the dirty work room and washes it again with mixed sanidril. The scrub places the instrument tray (containing all instruments) on sheets which the circulator fan-folds and takes it to the dirty work room. The circulator then opens the door of the autoclave and puts one ounce of Sonic Detergent into it. She then dons a pair of gloves and unwraps the instrument tray. She places the tray in the autoclave, being extremely careful not to contaminate the outside of the autoclave. She then removes her gloves, places them in the sheets on the table and folds the sheets from the outside to the middle. The door of the autoclave is closed; and the dial is set to the 27-minute wash-sterilize cycle; and the sheets, gloves and table are brought back to the room. Any equipment that can be and should be autoclaved but is too large to be placed in the autoclave is washed with mixed sanidril in the operating room by the scrub and is placed on sheets which the circulator has placed on the table outside the door. The circulator then wraps, tapes, strings and labels the equipment and takes it to Central Supply for sterilization. When this equipment is brought back to the operating room, sterilized, it is put into the dirty workroom, unwrapped, washed again, rewrapped and sent to Central Supply again.

All linen is collected by the scrub, brought to the door and placed into a plastic laundry bag which is held by the circulator in such a way that the linen does not touch the circulator's hands or the outside of the bag. The scrub places that bag into another plastic bag held in the same fashion by the circulator. This bag is tied securely, labeled, and put down the laundry chute. The trash is collected and disposed of using the same technique.

All equipment which cannot be autoclaved (such as straps on the table) is placed into the bucket of sanidril and allowed to soak for fifteen minutes. The outside of the bucket is washed with mixed sanidril by the scrub and given to the circulator. She puts the bucket in the dirty workroom where the used sanidril is flushed down the hopper and the equipment is washed. The circulator then dons a pair of gloves and brings the basin of mixed sanidril into the room. Both the scrub and the circulator wash all the equipment and furniture in the room and the walls up to a six-foot level. A slurry of mixed sanidril is poured on the floor and all the furniture is rolled through it. The floor is washed with Micro-Bac, after which the mop head and the towels used to wash the walls and furniture are discarded in a laundry bag, which is tied securely, labeled septic and put down the laundry chute. Then the furniture is washed down again and the room is set up as after a routine case.

b. Rewrap equipment to be sent to Central Supply.

No equipment is rewrapped at this time. (See Function #3b)

3. Care for used instruments after operation in the following ways:

a. Account for them

Not formerly done.

b. Clean

All the dirty instruments in an instrument tray except needles, asepto syringes, basins and suction tips are placed into the left side of the

d. Autoclave.

Refer to Function #4. All regular autoclaving is done in Central Supply.

4. Use autoclave to sterilize instruments during operation.

The instruments to be autoclaved are put into an autoclave tray and inserte into the autoclave. The door is closed and fastened shut, and the selector is set to "fastexhaust." If the number of instruments in the tray is less than eight, the time is set to five minutes; if there are more than eight, the time is set to ten minutes. The operator's dial is turned to "sterilizer." When the alarm sounds, signifying that the cycle is completed, the performer moves the operator's dial to "off." The performer checks the Bristol's Recording Pressure Gauge to see if the cycle ran for the set number of minutes (5 or 10) and to see if the temperature has reached 270° , he then determines if the inner chamber vacuum gauge is at "zero." The instruments may be removed from the autoclave by the circulator, who uses a pair of transfer forceps, or by a scrub in sterile operating room attire, who may pick the instruments up.

5. a. Order supplies from storeroom or Central Supply

Supplies are ordered weekly from the Main Storeroom by filling out the appropriate requisition in triplicate; two copies go to the storeroom, one remains in the Operating Room.

b. Receive supplies

Supplies from Central Supply are ordered daily on a duplicate requisition; one copy goes to Central Supply, one remains in the Operating Room. The performer who receives the supplies checks to see what may have been deleted from the order.

c. Arrange them on shelves in proper storage position.

Supplies are rotated, so that all new supplies are put underneath or to the right of supplies already stored on the shelves in the clean workroom.

6. a. Check supplies and equipment after operation

The furniture is accounted for and put back into its proper place; and all plugs (except for the formalin cabinet), nitrous oxide, oxygen and vacuum overhead lines are disconnected. Oral and abdominal suction units are reassembled. An emesis basin filled with water is placed on the anesthesia table.

b. Restock cabinets if necessary

The bottles containing prep solutions are refilled. Any extra supplies in the rooms or in the cabinets are removed and put in their proper place. The Bovie machine, or cautery, is left with the plates and the connecting cord on top.

c. Check for outdated supplies.

The cabinets are checked for missing and outdated supplies; any package that will be a month old on the following day is removed and unwrapped, and missing supplies are then replaced.

7. a. Type out schedules for the following day

Schedules are typed out in the afternoon with information obtained from the Anesthesiology Schedule Book and from the Admitting Office (patient's ward). The pathology lab is called to book any frozen sections for the next day. Information typed on the schedule includes patient's name, age, ward, operation, surgeon(s), time of operation and date of schedule.

b. List daily operations and daily patients.

The following information is kept in the Operating Room Log Book: date, patient's name, his unit number, the pre-operative and post-operative diagnoses, surgery performed, the names of the surgeons, first and second assistants, the scrub, and the circulator, the type of anesthesia given, whether the patient was a house or private case, the number of the case for the particular month, the number of correct sponge counts (if applicable). A list of patients' names and wards is sent to the operator after the day's schedule is complete.

8. a. Make out list of supplies used during operation

b. Make out and record charges to patients

c. Distribute this information to the appropriate departments.

Any chargeable item used on a patient during surgery is recorded on the back of the first page of the O.R. Memo. Examples: foley catheters, saline, orthopedic equipment, casts, drugs, vascular grafts.

9. Take dictation and type correspondence as necessary.

No dictation is given.

Correspondence may be typed and sent or taken to other departments in the hospital, administration, companies, personnel, magazines, other hospitals, doctors, various committees and so on. Call slips (names, telephone numbers and bellboy numbers of the two people on call each night in the operating room) are typed in duplicate; one copy goes to the switchboard operator, the other to the nursing office. New procedures are typed and filed.

10. a. Answer phone calls and notify appropriate personnel

The performer who answers the telephone gives his or her name and department. Written messages are taken for doctors in surgery and taped to their lounge door. Written messages for personnel are noted at the front desk or taped to their lounge door. Depending on the nature of the message, the performer may have to locate another person to receive the information (e.g., a nurse must take information about medications or lab reports; frozen section reports from pathology must be read by the pathologist himself over the intercom into the operating room). Bookings are referred to the Anesthesia Department.

b. Make phone calls as requested (including calling in medication order to the floor one hour preceding surgery).

Performer may call representatives from companies for repair or information about equipment; the blood bank, to determine how many units of blood are available for patients; X-ray department; lab; surgeons, to notify them that their patient is in the operating room; ward, to arrange or cancel appointments.

11. Keep clean, but on sterile equipment or instruments dust free.

The shelves in the clean work room, all bottles and all jars are damp-dusted weekly with mixed sanidril. Instruments used infrequently are removed from their pegs or boxes, put into an instrument tray and run through the ultrasonic washer (refer to Function #3a).

12. Go to surgical floor to pick up pre-operative patient by litter.

The performer obtains a litter from the Recovery Room, making sure that it is completely set up (i.e., clean linen, an IV pole, a pillow and an extra sheet to put over patient). The performer obtains the patient's name and ward from the front desk. When arriving on the floor, the performer checks with the charge nurse to see if the patient is ready to be transported to surgery and obtains the patient's chart and his room number. When entering the patient's room, the performer identifies himself and his mission and checks the patient's name bracelet. The bed covers are removed and the patient is covered with a sheet. A performer from the ward stands on the side of the bed, while the performer from the operating room stands on the side of the stretcher to prevent either from moving while the patient transfers himself from the bed to the stretcher. The sides of the stretcher are pulled up and the sheet is adjusted. If the patient has an IV bottle running, the pole is set up on the litter and the IV bottle is transferred. The litter is then wheeled down to the Recovery Room.

13. Prepare surgical kits for upcoming operations:

    a. Select, gather instruments

    Two sets of cards are used in picking surgical kits. The first, the procedure card, has the complete list of instruments to be put into an autoclave tray. The second, the doctor's preference card, lists any additional equipment which must be added to the procedure card list in order to satisfy the surgeon's needs. Once gathered, the instruments are wrapped (see Function #3b).

    b. Put them on cart to be picked up by Central Supply.

    Individual packs are placed on the rack in loose contact with each other and resting on edge, so as to permit rapid permeation of the steam in and around the pack. Large packs should not be placed on top of each other. Jars and other non-porous containers are placed horizontally on end. If small packages are placed on top of each other, they must be crisscrossed.

14. Going to the surgical floor prior to the operation to wash and shave operative area of patient.

    The area to be shaved is observed for any unusual manifestations; if any are present, the performer reports to the physician. If none are present, the performer makes the patient comfortable, reassures him and provides for privacy and good lighting. A sharp, straight or safety razor is used; and shaving is done against the grain of the hair to effect a clean, close shave. Every precaution should be made to avoid nicking the skin, as this allows a pre-operative infection to start. The extent of the prep is usually wider than the proposed incision. The night before the surgery, patients usually have two or three scrubs with a surgical scrub solution, each lasting approximately five minutes. The skin is washed with circular motions, rotating outward from the proposed site of incision to the most distant part of the prep area. As sponges become soiled, they are discarded; and the procedure is continued with a fresh sponge. The area is then rinsed and dried.

15. a. Wash

c. Assist in sterilizing the operative area when the patient is properly positioned on the table.

The performer usually only sets up the two skin preps for the surgeon. The first prep consists of a table draped with towels, a basin for solution, sponges, towels and gloves for the surgeon. The second prep consists of a cup with solution and two sponge sticks with sponges mounted on them; these are handed to the surgeon. The operative site is cleaned with a prepping agent for five minutes, using a technique similar to that described in Function #14, and dried with a sterile towel. A second coat of antiseptic solution is then painted over the operative site and may also be towel dried.

b. Shave.

Shaving is done when the patient is on the operating table only in a septic case, such as an absess; the shaving is then done after the patient has been anesthetized. In emergency surgery, the patient is shaved in the Recovery Room, using the technique described in Function #14.

16. Place equipment and instruments in Operating Room for upcoming operations and arrange them according to the requirements of the operation.

The performer gathers all necessary equipment, instruments and supplies listed on the appropriate Circulating Card and on the Surgeon's Preference Card from the clean workroom and places them on an instrument table. The instrument table is wheeled into the assigned operating room; and the performer unwraps the equipment using sterile technique (see Function #3c), so that her hands do not touch the equipment. The arrangement of instruments and equipment on the instrument table, Mayo stand and Ring stand depends upon the nature of the operation. If the case is a septic one, extra precautions must be taken. Extra furniture that will not be needed during the case is removed from the room, and an extra instrument table is brought into the room. Supplies that will be needed from the cabinets, such as sutures, gloves, drapes, gowns and towels, are placed on this table, which is then put outside the room close to the door. After the case is set up and the patient is in the room, the cabinets are taped shut; they are not reopened until after the room has been completely cleaned when the case is over.

Pieces of tape with "septic case" written on them are put on the doors leading into the room. A mat is placed outside the main door to the room, and mixed sanidril is poured over it. The equipment that is gathered for a septic case is placed on the bottom shelf of the instrument table outside the room. Traffic in and out of the room is kept to a minimum.

17. a. Moving the patient onto operating room table from litter

The litter is wheeled from the Recovery Room to the assigned Operating Room; the sides of the litter are lowered completely; and the litter is lined up with the O.R. table, making sure that both are equal in height. Two performers stand opposite each other with the litter and the O.R. table between them. This prevents the litter from moving and the patient from falling off an unguarded side of the table. The patient is usually able to slide himself onto the table with assistance.

b. Position, secure and drape patient as necessary.

Once the patient is centered on the table, a leg restraint is fastened. The patient should be covered; it may be necessary to get a warm blanket. The patient is positioned and draped by the surgeons after he has been anesthetized; the scrub hands the drapes to the surgeons. When the patient has an IV inserted, an IV board is placed on the table and the patient's arm is taped to it.

18. Aid surgical team to don gowns and gloves.

    The scrub, or sterile performer, passes a towel folded in half to the surgeon, making sure he does not touch the surgeon. If the scrub's gown or gloves touch the surgeon, the scrub must change. The gown, still folded, is passed to the Surgeon by the scrub. After the surgeon dons his gown, the circulator ties the string. Then the scrub holds open the cuff of the surgeon's right glove with both hands, with the thumb of the glove facing the surgeon. The surgeon then slips his hand in, and the scrub releases the cuff. The same procedure is followed for the left glove. Again, the scrub must not touch the surgeon during the gloving procedure.

19. Adjust the following during the operation:

    a. Lights

       Lights are adjusted by the handles so that the maximum amount of light shines on the operative site.

    b. Suction

       The suction tip is attached to one end of the suction tubing on the sterile field. The other end is passed off the field to the circulator and attached to another length of tubing, which leads to the suction bottle cap inlet. The suction bottle cap outlet is attached to a piece of tubing and a connecting valve. This valve is slipped into the overhead vacuum outlet.

c. Oxygen equipment

The oxygen tubing and connector valve is slipped into the overhead oxygen outlet.

d. Tables.

The Mayo stand is placed over, but not touching, the patient's feet; the height is adjusted and an instrument table is placed at a right angle to the O.R. table.

20. Leave Operating Room during operation:

a. To obtain additional supplies, instruments

Additional supplies and instruments are gathered from the clean workroom or the instrument bins.

b. To order additional units of blood, glucose, plasma or saline

Glucose and saline are obtained from the substerile areas between every two operating rooms. Frozen plasma is obtained from the Blood Bank by requisitioning on a white McBee slip.

c. Arrange to have an X-ray or a lab test done.

To arrange an X-ray, the performer calls the X-ray department and requests that an X-ray technician come to the O.R. Lab tests are performed on specimens sent to the lab with the appropriate requisition.

21. Obtain a culture during an operation.

The circulator removes the outer cellophane wrap from the culture tube and opens it. The scrub takes the swabs out and hands them to the surgeon, who takes the culture. The scrub receives the swabs from the surgeon and places them back into the tube held by the circulator. The circulator replaces the cap, labels the tube with a specimen tag and fills in a general use slip. The culture tube is taken to the lab immediately.

22. Accept, label and record all specimens received from surgeon.

The scrub receives the specimen from the surgeon and asks him how it should be labeled. Nothing which might be sent to the pathology lab is discarded without checking with the surgeon; no specimen is handed off the sterile field before checking with the surgeon. Multiple specimens are put into separate specimen jars, moistened with saline or formaldyhyde to prevent the tissues' drying out and labeled correctly with specimen tags. Bottled specimens are placed in the refrigerator in the Recovery Room after each case. The Pathology Sheet is detached from the O.R. memo and a white McBee slip is attached to it and left at the front desk.

23. Set up and adjust a cautery under surgeon's directions.

The indifferent electrode, a large stainless steel plate, is lubricated and placed under the patient's buttocks, in direct contact with the skin.

This is connected to the machine by an electric cord; and the electrode operative tip is fastened into a handle, which is, in turn, fastened into the active electrode slot by means of another cord. The foot pedal is placed near the surgeon, and the machine is plugged in. The cutting and coagulation dials are set as directed by the surgeon.

24. Care for the deceased person:

    a. Notify appropriate personnel

    Four "Critical List Cards" are filled out properly and distributed to the switchboard, the front desk, the Admitting Office and the Nursing Office.

    b. Tie and pad person

    The patient's eyes are shut and taped if necessary. A diaper is placed under the patient's buttocks. The patient's arms are folded over the chest; and the wrists, elbows, ankles, knees and chin are padded and tied securely. Three identification tags in the shroud kit are filled in; one is placed on the patient's big toe; a second, on the outside of the shroud; and the third, on the bag containing the patient's personal property.

    c. Remove IV's and dressings

    All IV's are removed and band-aids are used if necessary. Soiled dressings, drains and packings are removed, replaced with clean dressings and taped securely.

d. Take person to morgue.

A stretcher is obtained from the morgue. The shroud is placed on the stretcher, and the patient is put on top of it. Then the shroud is folded completely over the body and tied at the neck, waist and ankles. The stretcher is then transported to the morgue.

25. Assist in moving post-operative patient from operating table to litter; assist in moving litter to Recovery Room.

Four performers should be available to move the patient: one for the head, one for the feet and one for each side. The stretcher, or litter, with a roller on it is placed next to the O.R. table, making sure that both are equal in height. One performer rolls the patient onto his side, away from the stretcher, while another performer places the roller behind the patient. The patient is turned or rolled back onto the roller; and with performers supporting the patient's head and feet, the patient is rolled onto the stretcher. The roller is then removed from the side of the patient. A warm blanket is placed over the patient, and the sides of the stretcher are raised. The IV bottle is hung on the pole attached to the stretcher.

Two performers, one being the Anesthetist, wheel the stretcher into the Recovery Room, one guiding the head and one the bottom of the stretcher.

26. Keep track of needles and instruments used during operation.

In most cases, the performer must receive a needle before he or she hands another to the surgeon. If the performer fails to receive a needle, he must notify the surgeon. When it is necessary to hand another needle to the surgeon before receiving the first (e.g., when the surgeon is using a needle for a guide traction suture), the performer must still keep a correct count of the needles on the field and obtain these needles before closure begins.

27. Assist in sponge count after operation.

Sponge counts are taken on all abdominal, thoracic, joint and radical cases. Sponges and tapes are routinely counted at four different times: when they are wrapped for sterilization, when each package is opened in the Operating Room, when wound closure begins, and when the first layer of muscle is closed. If a body cavity, such as the uterus or bladder, has been opened, a fifth count may be taken when the cavity is being closed. In doing a sponge count, the unsterile performer opens the package of sponges onto the sterile field. The sterile performer then holds the entire package in her hand and shakes them to separate them. The sponges are counted once closed and once opened, at which time they are checked for frayed edges and radio-opaque threads. The number of sponges is recorded on the O.R. memo and signed, and the surgeon is told whether the count was correct or incorrect. If the package contains more or less than ten sponges, it is removed from the room. Only certain performers may sign for sponge counts.

28. a. Hand instruments to surgeon

Instruments are placed firmly in the surgeon's hands in the position in which he is going to use them, so that he will not need to make any adjustments. Clamps and scissors are grasped with the thumb and the first two fingers at the box lock. Clamps should be closed to the first notch on the ratchet. Needles are handed in the same manner on needle holders, holding the suture material so that it does not drag (i.e., fall below the sterile field). Thumb forceps and retractors are handed so that the surgeon can grasp the handle. The scalpel is passed by the handle just beyond the blade with four fingers on one side and the thumb on the other. Instruments should not be dangled near the surgeon's hand.

b. Hold retractors

The retractor is handed to the surgeon, and he positions it. After it is positioned, the surgeon tells the performer how much traction to exert. The performer releases the retractor when so instructed by the surgeon.

c. Cut sutures as directed during operation.

The performer approaches the suture with the scissors closed and opens them just before cutting. Sutures that are cut inside the wound are cut at the knot; skin sutures are cut approximately one-half inch beyond the knot. A suture should not be cut unless the performer sees it completely.

29. Assist surgeon or anesthesiologist in administering:

    a. Plasma
    c. Glucose

    The performer may obtain it upon request and pass it to the anesthesiologist.

    b. Blood

    The unit of blood is obtained upon request; it is checked with the anesthesiologist by using the label on the blood bag, the label attached to the blood bag and the requisition for transfusion. All information must check (e.g., patient's name, blood type, Rh factor, etc.).

    d. Medications, other injections or transfusions during operation.

    Medications are usually obtained by the unsterile performer as ordered by the surgeon and checked and drawn up into the syringe by the sterile performer. Certain performers may administer intramuscular medications; the anesthesiologist administers IV medications.

30. Assist surgical team in case of patient's cardiac arrest:

    a. Assist in passing instruments

    Refer to 28a. A special kit for opening the chest for internal cardiac massage is opened and given to the sterile performer.

b. Bring in, assemble equipment

The cardiac arrest cart is obtained, and the oxygen lines are connected to the overhead outlets. Equipment and supplies are taken from the cardiac arrest cart and given to appropriate personnel as necessary.

c. Operate equipment

The anesthesiologist is responsible for the monitor, the defibrillator (which are always set up during an operation) and the administration of oxygen.

d. Draw up medications.

Medications are drawn up as ordered from the cardiac arrest cart.

31. Check or double check patient's chart upon his or her arrival to the operating room to be sure lab work is done, his operative permit is signed, pre-operative medications have been given and so on. The following information must be on the patient's chart:

1. Check the name to be sure it is the correct patient's chart.
2. The general surgical permit and any special permit (such as for a hysterectomy or amputation) must be signed.
3. The pre-operative medications must have been signed off on the order sheet and noted on the post-operative sheet.
4. Special lab work, hematocrit, hemoglobin, urinalysis, EKG (if ordered) and the patient history and physical must have been completed.
5. The clinical record and the doctor's order sheet must be up-to-date.

6. The patient's addressograph plate should be enclosed.
7. The post-operative sheet must be correctly filled out:
    a. Medications written out, including time given, route of administration and dosage.
    b. Checkmarks to indicate completed history and physical, signed permit, completed urinalysis and blood.
    c. "Voided/catheterized" circled, and the time and amount indicated.
    d. Vital signs and blood pressure before leaving floor.
    e. Signatures of the charge nurse and the nurse filling out the sheet.

32. Book operations in conjunction with anesthesiology.

Cases are booked only if the following information can be given at the time that the booking is made: patient's name and ward (if patient is in the hospital at the time of booking), proposed operation, estimated duration of operation, type of anesthesia, name of surgeon and assistants (if possible), whether the case will be septic, the number of units of blood to be ready and any special equipment needed. Cases are booked on a first-come, first-served basis in accord with availability of anesthesia and operating room facilities and personnel. Bookings for the following day are normally accepted from 9:00 a.m. to 1:30 p.m.

33. Schedule and assign personnel to scrub, to circulate or to assist in operating rooms.

    Personnel are scheduled in accordance with their experience, their need for a learning experience under supervision and the needs of the patient who is having surgery. Normally, one scrub and one circulator are assigned to each case; one circulator only need be assigned to a D & C; two circulators and a scrub are assigned to complex or septic cases.

34. Inspect operating rooms and workrooms for order and cleanliness.

    Each area is inspected thoroughly at the end of the day by the performer in charge, who is familiar with the functions that should have been performed in each area.

35. Orient and train new employees.

    New employees are shown where equipment, supplies and instruments are kept and how and for what they are used. They are taught Operating Room procedures and policies. Finally, they double-scrub and double-circulate before they are allowed to first-scrub and first-circulate under supervision. A Procedure Manual is available in the department.

36. Supervise and evaluate quality of the work done by operating room personnel.

    There is presently no formal, written evaluation of Operating Room personnel. Supervision and evaluation are usually done informally; staff meetings are held at least monthly where new procedures are explained; mistakes and poorly-done work are discussed; and good work is praised. The performer supervising usually informally observes operations in progress and, if she notes any errors in procedure, discusses them with the performer who made the mistake.

37. Supervise maintenance of records.

Supervising maintenance of records involves checking to see that the Operating Room Log Book is up-to-date and accurate and that schedules of daily operations and patients have been prepared. Information needed for the Log Book is obtained from the O.R. Memo, which is filled out after each case (refer to Function #7b).

38. Investigating and adjusting complaints.

The performer investigates and adjusts complaints, as necessary.

WARD SECRETARY

1. Charting vital signs, intake and output and weights.

   The performer transfers patient's recorded temperature, pulse, respiration and blood pressure (if necessary) from the Temperature Book to the Clinical Sheet in each patient's chart. All charting is done in blue ink, except for blood pressures and rectal temperatures which are charted in red. The patient's fluid intake and output for the preceding day has been totaled by the night shift personnel; this information is also transferred to the correct slot (i.e., urine output, IV intake, intake by mouth, drainage output and so on) on the patient's Clinical Sheet. Admission weight and daily weights (if so ordered by doctor) which have been recorded in the Pre-Meal Glucose Text book are recorded by the performer on the patient's Clinical Chart. Pre-Meal Glucose Test results are recorded on a separate, specific page in the chart.

2. Preparing admission and discharge records, transfer records,

   After the performer has received notification of admission by Admitting Office, she sets up the Clinical Chart with a Clothing Slip, Lab Report Slip, Lab Data Sheet and Clinical Sheet. Depending on the nature of the patient's medical service (i.e., surgical medical, vascular, obstetrical and so on), an appropriately colored name tag is made, with the patient's last name and doctor's name on it, and taped to the patient's chart. Another colored name tag with the patient's last name on it is slid into the correct slot (i.e., next to the number of the room into which the patient is going) on the Patient Name Board. All sheets in the patient's Clinical Chart are stamped with the patient's addressograph plate as soon as it is brought up by the Admitting Office.

When a patient is to be discharged, the performer checks the chart to make sure that everything is up-to-date and all sheets are stamped with the addressograph plate. A return clinic appointment (Out-Patient Department) is made for the patient, and a card is filled out and given to the patient as a reminder. The sheets in the chart are then arranged in a certain order (face sheet; emergency sheet, if any; operating room sheets, if any; pathology report; EKG, lab and X-ray sheets; medication sheets; physician order and note sheet; clinical sheet; clothing slip). The completed chart is taken to the Admitting Desk by whoever escorts the patient downstairs. If a patient is to be transferred to another department or floor, the performer takes the face sheet from the chart to the Admitting Office to allow them to make their necessary changes and then to the Record Room for that department's changes. The sheets in the chart are put in order as for a discharge, adding the medication sheet from the Kardex and the diet sheet. The department or floor to receive the patient is called to arrange the best time to move the patient.

3. Ordering central supplies as requested by Head Nurse.

   The performer checks the cabinet in the clean utility room to determine the number of bottles of IV solution needed. A requisition is then filled out and put on the Central Supply cart, which is sent or taken back to Central Supply. Other supplies from Central are brought up routinely on a stocked cart and do not have to be ordered.

4. Checking Diet Chart twice a day for correctness.

   The Diet Chart is brought up by Kitchen personnel about one hour before meals. The performer checks the Kardex, where the patients' diets are recorded, to see if any changes should be made in the type of diet.

5. Inserting completed lab and X-ray slips in patients' charts.

   Lab slips are received and stuck onto the lab slip sheet. As one lab slip sheet becomes full, the performer obtains additional sheets from the Nurses Station. X-ray sheets are simply inserted in the chart behind the lab slip sheet.

6. Straightening up nurses' station.

   The performer straightens up the area, including wiping off counters, putting charts back on rack and generally putting cards, papers and supplies back in their proper storage position.

7. Collecting and sorting patients' records; calling dispatcher to come to pick up old records, if necessary.

   The performer reorganizes charts left around the Nurses Station and takes old records back to Record Room if dispatcher is not available.

8. Maintaining a current Kardex.

The performer makes out a new medication form which is removed from the Kardex; two copies are taken to the pharmacy, and one copy is put into the patient's chart to maintain a cumulative, on-going record of medications received. New forms are then inserted into the Kardex.

9. Answering questions, giving information to patients or visitors, or directing the questions to the appropriate personnel.

The performer may direct visitors or staff to patients' rooms, direct staff to other floor staff, keep track of patients' locations (e.g., when patient is in X-ray or operating room). The performer may refer questions to other personnel if she cannot or should not reveal requested information (e.g., questions about patient's medications or treatments).

10. Answering the telephone and the intercom, and notifying the appropriate personnel.

The performer may answer the telephone and take information, checking carefully to make sure information has been received correctly; she may answer the telephone and give information, again depending on the nature of the information requested; or she may answer the telephone and locate the person to whom the information should be relayed. In answering the intercom, the performer notes the patient's room from which the signal is coming, presses a bar that allows her to communicate with the patient and relays the nature of the request to the appropriate personnel.

11. Making phone calls as requested by department staff or patients.

The performer usually instructs the patient to make phone calls from one of the pay phones on the floor but will call the patient's home if he or she is being discharged. Performer makes a variety of phone calls for floor staff, mostly calling X-ray, lab, the kitchen or other departments, or paging personnel by calling the switchboard operator.

12. Ordering stationery supplies for the nursing unit.

Stationery supplies are ordered twice a week from the Main Storeroom, which handles largely unsterile supplies (or supplies that cannot be re-sterilized) such as office supplies and materials to stock patient's bedside stand. Supplies that come from Central Supply are considered sterile. Performer checks the storage places on the floor, determines what is needed and fills out requisitions as necessary.

13. Operating the addressograph.

Each patient has an addressograph plate with name, address, patient's unit number, age, doctor, sex, religion, telephone number, date and time of admission, type of accomodation (e.g., private room) and closest of kin stamped on it. This plate is inserted in the addressograph; the paper to be stamped is placed on top of the plate; and the stamping arm is rolled over the paper and plate, imprinting the stamp on the paper.

14. Filling out condition sheets.

    Each patient is listed by his last name. Discharges and the condition of every patient as of 3:00 p.m. are recorded next to the appropriate patient's name. This list is then brought to the switchboard operator.

15. Booking appointments outside the hospital (e.g., a brain scan at Mt. Auburn Hospital); arranging for transportation.

    The performer calls the outside hospital and schedules the appointments. A charge slip is then stamped with patient's addressograph plate, and the performer lists the test that the patient will have. Next, the order is obtained. The Admitting Office is informed of the forthcoming test, and they arrange to have an ambulance take the patient. The performer then inserts the purchase order in the Kardex and removes it to give to the driver of the ambulance when he arrives to pick up the patient.

16. Putting away supplies and equipment, or making sure they are put away.

    When the supply cart or basket arrives from Central Supply or Main Storeroom, materials are checked and put in proper storage place in the clean utility room, the dirty utility room or the nurses' station.

17. Other functions:

    a. Ward secretary meeting.

       The performer attends this regularly scheduled meeting.

b. Taking patient down after discharge.

See General Nursing Appendix, #9.b.

c. Going to Central Supply or lab; departmental errands.

See General Nursing Appendix, #3.

d. Distribute mail and flowers.

See General Nursing Appendix , #2.

e. Training new ward secretaries.

The performer instructs new ward secretaries in their duties and responsibilities.

INHALATION THERAPY DEPARTMENT

INHALATION THERAPY TECHNICIAN

1. Check oxygen cyclinders, nitrous oxide bank and nitrous oxide cylinders to make sure supply is adequate.

   The performer reads the gauge on the nitrous oxide bank in the basement, which shows the amount of pressure in the tanks. If the pressure is too low, the performer throws a lever which switches on the Reserve Bank. The old tank is subsequently replaced with a new tank. New tanks are ordered as necessary from an outside company. The performer also reads the gauge on the oxygen bank, located outside; if the pressure gauge reads below fifty, an outside company is called to refill the tank.

2. Making rounds at 8 a.m. and 3 p.m.:

   a. Check warning lights in operating room, oxygen and nitrous oxide in delivery room, Ambu-bags and laryngoscopes on emergency carts and permanent equipment in Recovery Room, Emergency and I.C.U.

   Warning lights should be off. If they are on, it means that the oxygen supply is low (refer to Function #1). Emergency carts on each floor are checked to make sure that they are stocked with Ambu-bags and laryngoscopes; and permanent equipment in the Recovery Room, Emergency and Intensive Care Unit (including hypothermia blankets, oxygen set-ups, a Bennet respirator and suction machines) is checked to make sure that it is operating correctly and that there is pressure in the oxygen tanks.

b. Pick up used equipment from floors

Used equipment is picked up from the dirty utility rooms on each floor, put into a cart and brought to the Inhalation Therapy Department.

c. Visit inhalant patients.

Inhalant patients are visited when treatments are given to them; the performer may also visit them simply to check on their condition and reaction to treatments.

d. Make any necessary adjustments, repairs (if possible) on equipment

Repairing equipment involves: determining the source of the trouble, dismantling and cleaning the parts, and reassembling the equipment. The performer may change fuses on the Emerson volume ventilator, the Bird and Bennet respirators and the incubators. If any part of the machine is broken, a new part must be ordered from an outside company.

e. Restock any supplies on floors.

Oxygen masks, nasal cannula and nasal catheters are routinely brought to the floors from the Inhalation Therapy storeroom.

3. Wash, sterilize and put away used equipment.

Equipment is dismantled as much as possible and necessary, and disposable parts are thrown away. The dismantled parts (i.e., tubing, bottles) are soaked in Alconox and hot water; then they are sterilized in Cidex by soaking the equipment for ten minutes. The performer must remove the equipment from the Cidex with forceps (or use rubber gloves); it is then rinsed with hot water and hung to dry. Machines are wiped or cleaned with ether or Amprolene sterilizer if there is a chance of contamination (i.e., if patient has a communicable disease) or if the valves become stuck. Oxygen set-ups are kept in plastic bags to keep them dust free. Cidex solution is discarded and replaced every two weeks to ensure its effectiveness.

4. Order, receive and put away supplies.

For equipment or supplies ordered from Central Supply, one standard requisition is filled out. For equipment or supplies ordered from outside the hospital, two copies of the requisition are filled out: one for the department files and one for the outside firm. Orders are checked and signed for by whoever receives them; and the order slip, or price slip, is taken to Accounts Payable. Equipment and supplies are then arranged in their proper storage position on shelves in the Inhalation Therapy storeroom.

5. Examine patients' charts, record treatments given and insert pulmonary lab function reports and pulmonary consultation sheets.

The performer examines the patient's chart for diagnoses, treatments, medications (being received by the patient), referring physician and clinical history. The date, time treatment given, any medication given and any comments are recorded on the Inhalation Therapy Treatment sheet and initialed by the performer. Pulmonary lab function reports and pulmonary consultation sheets are received from the Department Head (a physician) and clipped into the appropriate patient's chart.

6. a. Record cost of materials and equipment used

   A department requisition is filled out in duplicate for every supply or piece of equipment ordered outside the hospital. One copy is kept in the department and filed, noting the date received; the other is sent to the Accounts Payable.

   b. Make out patient charge slips for inhalants, equipment used or treatment given.

   The performer writes treatment, price (checking department standard price list), date and department on charge slip. The slip is then stamped with patient's addressograph stamp. Charge cards are made out daily (for treatments given the preceding day) and taken to the IBM office.

7. a. Maintain a current Inhalation Therapy Kardex

   The performer writes patient's room number, date treatments started, diagnoses, treatment, and doctor on patient's Kardex sheet and stamps it with patient's addressograph plate. Ensuing treatments are added to the Kardex sheet and initialed by performer. Sheets are discarded when treatments are discontinued.

   b. Maintain ongoing records of patients serviced, of charges made to patients and of pulmonary function sheets.

   The same information as above is also kept cumulatively in a looseleaf binder. Pulmonary function sheets are filed.

8. Care for suction machines, including wall suction units, thoracic suction units, etc.

   a. Wall-suction unit and thoracic-suction unit: The performer plugs the unit into the vacuum outlet on the wall next to patient's bed, connecting the tube from the suction unit to a tube that has already been inserted by nurse or physician. The performer then turns the knob to regulate amount of vacuum, as specified by physician.

   Floor-suction unit: The performer plugs unit into electrical outlet, connects tubing in the same manner and moves a switch to "on." The amount of vacuum cannot be regulated.

   Intermittent-suction unit: The performer plugs the unit into a vacuum outlet and connects the suction tube to the patient's Levine tube (stomach drainage suction only). The performer then turns a knob to adjust the vacuum pressure (high-low) and another knob to adjust the speed of suction (fast-slow).

   Catheter-suction: This is either a wall-suction or a floor-suction unit and is set up and operated in the same way. The tubing, however, is disposable and is inserted directly into the patient's nose, throat or tracheotemy tube.

9. Care for oxygen mask, nasal cannula.

   The performer fills the bottle with distilled water, which can be obtained from the clean utility room on each patient floor, and screws the flow gauge onto the top of the bottle. The unit is then plugged into either the oxygen wall outlet next to the patient's bedside or an oxygen cylinder, if there is no wall outlet. The oxygen mask is fitted comfortably but tightly over the patient's nose and mouth and strapped around the back of his head. Tubing runs from the bottle to the mask. The nasal cannula is set up in the same manner except that tubing fits into each nostril and is strapped around the head. The performer then turns a knob on the flow gauge to adjust the flow to about six liters per minute, unless otherwise specified by physician.

10. Care for aerosols, administering both heated and a cooled oxygen.

Cold aerosol: In administering the cold aerosol, the bottle is filled with distilled water, unless otherwise specified by physician; and the flow gauge is screwed onto the top of the bottle. The unit is then plugged into the oxygen wall outlet or an oxygen cylinder. Hose tubing runs from the Bird micronebulizer bottle to a plastic face tent, which fits loosely over the patient's chin, nose and mouth and is strapped around the back of the head. The performer adjusts the liter flow gauge to approximately six liters, unless otherwise specified by physicia The patient breathes in a cool mist.

Heated aerosol: A heated aerosol is set up in the same manner as a cold aerosol, except the Bird micronebulizer bottle has a heating rod in it, and the machine is plugged into an electrical outlet. The patient breathes in a heating mist (like humid air).

11. Care for incubators.

Refer to function #2d. Personnel in Inhalation Therapy are concerned with repairing only.

12. Care for croup tents in pediatrics.

Canopy support is attached or screwed onto the bed, and the plastic canopy is hung by hooks from the support and tucked in under the mattress. The drainage hose is attached; the end of it is placed in a bucket of water on the floor. The ice chamber on the back of the unit is filled with ice cubes, and the nebulizer bottle (through which the oxygen flows) is filled with distilled water or as prescribed by physician. The unit is then plugged into the wall oxygen source, and the flowmeter is adjusted to regulate the flow of oxygen from five to fifteen liters per minute, as specified by physician. The patient breathes the oxygen as a cooled mist.

13. Care for ultrasonic nebulizers.

The performer plugs the ultrasonic nebulizer into an electrical outlet in the wall. The reservoir is filled with distilled water or saline. Two knobs are adjusted: one turns the machine on, the other controls the density of the mist. The oxygen is usually administered through a face tent or tracheotemy mask, a device that fits tightly but comfortably over the tracheotemy tube and is strapped around the patient's neck. The water or saline is transformed into a very fine mist which the patient receives as a humid vapor. The tracheotemy mask is discarded after use.

14. Care for air mattress and hypothermia blanket.

The plastic air mattress is placed between two sheets on the patient's bed, plugged into an electrical outlet, and switched on. Most air mattresses have a knob to adjust the air pressure in the channels of the mattress (high or low). A pulsating machine connected to the air mattress sustains the air pressure. The hypothermia blanket looks like the plastic air mattress and is set up in the same manner. The pump in the back of the machine is filled with water, which flows through tubing into the channels of the plastic "blanket." The temperature control dial is set at 40° for five minutes to initially cool the water. Then two alternatives are available: a button labeled "Manual" may be pressed, which allows the performer to adjust the temperature of the water in the blanket by moving the temperature control dial, as specified by physician; or a button labeled "Automatic" may be pressed, which allows the patient's body temperature to control the machine (a probe which has been inserted into the patient's rectum is connected to the machine, and another knob is turned to set the temperature at 99.6°, the normal rectal temperature).

15. Care for Emerson volume ventilator.

The performer plugs the machine into an electrical outlet and the flow liter gauge into a wall oxygen outlet. The side cabinet door is opened, and the kettle (which acts like a pressure-cooker) is filled with water. "Inhale" and "exhale" buttons are set to obtain the desired rate of respiration. The pump is switched on, and the amount of humidity is set (high or low). The alarm is turned on, so that if anything goes wrong, the alarm will sound. The amount of tidal volume desired is set by turning a dial (1000 cc, unless otherwise specified by physician). A tube which runs from the machine is attached to an endotracheotemy tube which has already been inserted by a physician. The Emerson volume ventilator breathes for the patient.

16. Care for Bird and Bennet respirators.

The Bird and Bennet respirators operate on the same principle and in approximately the same manner. When used for therapy, they irrigate the lungs and loosen accumulated secretions on the lining of the lungs. When used in respirating a patient, they either assist the patient in breathing or breathe for the patient. Both are plugged into the wall oxygen outlet or into a compressed air outlet when oxygen is contraindicated. The nebulizer is filled with water, saline, medication or a combination of water and medication, as specified by a physician. Three knobs are adjusted: to regulate the pressure under which the oxygen and medication are administered, to control the amount of nebulization, and to adjust the sensitivity of the machine. If the machine is being used to respirate the patient, additional knobs are adjusted: flow rate, air mix and respiratory rate. Essentially, oxygen flows from the wall outlet at a pressure of sixty pounds per square inch into the machine, where the performer readjusts the flow. The oxygen then passes into a breathing tube, with a point at which the nebulizer mist joins the breathing tube. The patient receives the mist via a mask, a catheter, a cannula, a tracheotemy tube or a mouthpiece.

17. Administers gases other than oxygen, including:

    a. Compressed air

    Compressed air is administered via a Bennet or a Bird respirator. Refer to function #16.

    b. Carbon Dioxide.

    Not done at present by performers.

18. Informally instructs trainees, nurses, interns and residents in the operation and care of equipment.

    Personnel on the floors are taught: how to care for the machines, once the machines have been set up; how to set up and start oxygen in an emergency; how to suction a patient; and what danger signals to watch for in certain treatments and with certain machines (e.g., the Bennet has no alarm and the patient being respirated must be checked frequently to make sure his airways are not blocked).

19. Discuss treatments with physicians; make recommendations.

    The performer may talk informally with physicians about a patient's condition and his reaction to treatments and make additional suggestions for therapy. If, after checking a physician's written orders, the performer questions the prescribed therapy, he will call the physician and discuss it with him before administering it.

20. Administer medication via inhalation therapy equipment, including:
    a. Determine amount of medication necessary
    b. Draw up medication
    c. Put medication in equipment.

    Medication is administered via the Bird or Bennet respirators. The kind and amount of medication is determined by a physician. The performer locates the correct medication from the locked cabinet, draws the prescribed amount up into syringe, unscrews one end of the nebulizer and inserts the medication, and then reassembles the nebulizer.

21. Run blood gases on patients to determine PO_2, PCO_2, pH, HCO_3 and so on.

Calibration: the water bath is adjusted to the level marked on the front of the bath; the temperature is then adjusted to 37° Centigrade by moving the "temperature" knob on the bath plate. The suction is turned on; the activated nozzle is placed in the cell to dry the sampling chamber. Gases are turned on and allowed to bubble through humidifiers at a rate of 5 to 6 bubbles per second. The "gas selector" in the cell is placed at the lowest level and closed.

The "selector" knob is turned to "PO_2," and the reading is adjusted to zero by moving the "zero" knob on the PO_2 panel. The "selector" knob is then turned to "PCO_2," corrected for barometric pressure and adjusted with the "adjustment" knob on the PCO_2 panel. This sets the low gases (zero).

To set the high gases (slope), the "gas selector" is placed in the highest position and closed. The "selector" knob is turned to "PO_2" and adjusted for barometric pressure; the reading is adjusted with the "vernier" knob on the PO_2 panel. The "selector" knob is turned to "PCO_2;" the reading is adjusted for barometric pressure and adjusted with the knob on the "sensitivity" scale.

The gas selector is removed, and the chamber is filled with saline.

To calibrate pH, the performer first presses the "electrode" button on the bath plate and then suctions fluid from the electrode. To set the lower buffer, the performer fills the electrode with 6.84 buffer by suction from a vial and presses the KCL lever twice. The reading is then adjusted to 6.84 with the "adjustment" knob on the pH panel, after which the electrode is emptied and rinsed with saline.

To set the high buffer, the electrode is filled with 7.38 buffer in the same manner as above, and the KCL lever is again pressed twice. The reading is adjusted to 7.38 with the knob on the "sensitivity" scale.

Equipment needed:

5 or 10 cc. syringe with heparin, 18 or 20 gauge needle, dead head for syringe, ice.

An arterial blood sample is drawn and put immediately into ice. The sampling chamber is emptied by suction, allowed to dry and then filled with blood. The performer first moves the "selector" knob to "PO_2" and reads and records the value; then he moves the knob to "PCO_2" and reads and records that value. The pH electrode is then filled with saline from the cell by suction, and the KCL lever is pressed twice. The "selector" knob is moved to "pH," and the performer reads and records the value. The pH electrode is rinsed with a rinse solution and then saline, and the fluid is suctioned out. The sampling chamber is rinsed with saline, then with a soap solution, and again with saline; then it is allowed to dry. The entire process is repeated from five to fifteen times until the values check. Last, the sampling chamber and the pH electrode are filled with saline. When the machine is not in use, the water bath is left on, the suction is turned off, the selector switch is left in neutral position, and the timer is turned to zero.

22. Assisting physician in doing lung profile, including measuring air capacity, flow rates and so on.

The performer pushes the bell down to the bottom and closes the two-way valve. The helium meter is adjusted to zero. The performer then introduces 180 cc. of helium, opens the valve and presses the bell to the bottom. She then closes the valve and reads the initial helium percentage from the meter. Two liters of air are added, and the final helium percentage is read. The performer then calculates the dead space in the following manner:

$$\text{Dead space} = \frac{(\text{Bell volume})\ \ (\text{Final Helium reading})}{\text{Initial Helium} - \text{Final Helium}}$$

The machine is set up as for a determination of dead space, with a total volume of 5 liters of air with a helium concentration of 65% to 75%. The mouthpiece is inserted into and attached to the patient's mouth, and a nose clamp is applied. The system is opened, the patient is instructed how to breathe into it, and the helium percentage is recorded until equilibrium is reached. The performer measures and records the inspiratory capacity and the expiratory reserve capacity; then he adds these two volumes together to determine the slow vital capacity. The functional residual capacity is calculated in the following manner:

$$\frac{(\text{Total Volume})\ \ (\text{Initial Helium} - \text{Final Helium})}{\text{Final Helium}}$$

The total lung capacity may then be calculated:

  Functional Residual Capacity
- Expiratory Reserve Volume

  Residual Volume

+ Slow Vital Capacity
  Total Lung Capacity

23. Assist physician or nurse in resuscitation of a patient.

Refer to the Nursing Appendix, Function 46d. The Inhalation Therapy Department is routinely notified of every resuscitation; whether or not a performer actually participates depends on how quickly he can reach the patient's room. If other medical personnel there know how to set up and start oxygen treatment, they will not wait for a performer from Inhalation Therapy.

X-RAY DEPARTMENT

X-RAY TECHNICIAN

1. Cleaning and putting away equipment and supplies.

After each routine X ray, the performer changes the pillow case on the pillow on the X-ray table and washes down the table with either alcohol and sponges, aqueous Zephiran or Phisohex. The alcohol and aqueous Zephiran are kept in each X-ray room; the Phisohex is kept in the central storage area in the department. Special care must be taken after a patient with an infectious disease has been x-rayed; everything that the patient has come in contact with or has come close to is washed or wet-wiped with one of the above solutions. All used instruments are washed with soap and water and then put into the basket to be returned to Central Supply for autoclaving. Disposable materials are thrown into the trash receptacle. Any equipment or supplies used are eventually returned to their proper storage position either in the central storage area or in cabinets or on shelves in the X-ray room. The rooms, including the floors, cabinets, shelves, table, and X-ray machine, are also regularly cleaned.

2. Preparing and positioning patient on X-ray table.

Patients coming from wards in the hospital are usually prepared for the X ray. Others (primarily out-patients) must be: Instructed to remove any clothing with metal objects, given a hospital gown, and directed to or assisted to the dressing rooms.

Patients are positioned according to the requirements of the X-ray exam. If they will be lying on the X-ray table, for example, they are centered according to lines on the table. If they are having a chest X ray, they will stand with their hands on their hips and their chin on the top of the machine.

3. Adjusting immobilization devices, such as restraints or chest straps, if necessary.

   Patients must be tied down with straps or harnesses if they are disoriented or uncooperative. Two or more performers may be needed to hold a particularly uncooperative patient.

4. Protecting the area not to be x-rayed with lead shield, as with children or pregnant women.

   Since the X-ray machine can be "coned down" so that the radiation hits only the area to be x-rayed, protecting the rest of the patient is not usually necessary. However, extra precautions may be taken in some instances, in which case a lead apron is placed over the area not to be x-rayed.

5. a. Check requisitions for good clinical history

   The performer checks the clinical history to determine the patient's diagnoses, condition and any significant notes that may influence the nature of the X ray and the positioning of the patient. For example, the patient may have a heart condition, in which case the performer would not make the patient stand for a chest X ray (so that he would exert himself as little as possible). The performer may learn that the patient is blind or deaf or that he has an infectious disease, and so on.

b. Check developed films for markers, numbers and dates.

The performer checks the upper right-hand corner to make sure that the patient's name, date and unit number have been clearly imprinted in the developing process. The performer used lead markers during the X ray to distinguish the side or angle from which the X ray was taken; she notes this on the developed film.

6. Booking appointments.

The performer notes - the patient's name, where the patient is coming from (either a floor in the hospital or his home address) and the X-ray exam being done - and assigns a time to the patient. The performer must know approximately how much time a certain X-ray exam will take, as well as the staffing situation for that day, to be able to schedule the appointment.

7. Answering phone calls, taking messages; notifying appropriate personnel.

Refer to Ward Secretary Appendix, Functions #9 and #10.

8.a. Locating X-ray examinations from files and supplying physicians with them

To locate a patient's X-ray exam results, the performer obtains the patient's assigned X-ray number from either the card index or the Log Book. X rays are filed according to patient's X-ray numbers.

b. Putting up completed films for doctors to observe.

The developed film is removed from the processor and is hung up in front of a light screen to be viewed by the doctor. Sometimes X rays are brought to the ward or to the doctor's office for viewing.

c. Filing X-ray examinations and records.

The performer puts the developed film into a large envelope and writes the patient's name, X-ray number, age, date, X-ray exam(s) done and number of films taken. The performer checks the Card Index to see if the patient has any other X rays on file; if he has, these are obtained, and the envelopes are put together and filed according to X-ray number.

9. a. Maintaining records of drugs, supplies and equipment used and X rays taken

b. Going to Central Supply to get routine supplies, drugs and equipment

Inventory is taken weekly. The performer compares the list which shows the amount of drugs and supplies which should be on hand to the amount of drugs and supplies that are on hand. Requisitions are then filled out for anything that is needed, and these are sent either to the Main Storeroom, the Pharmacy, or Central Supply, where the order is filled.

c. Ordering drugs, supplies or equipment outside hospital

Based on inventory, an order is placed whenever necessary. A requisitior is filled out in triplicate, and depending on what is being ordered, the performer may have to get the approval of the department chief or other hospital administrative personnel. A monthly inventory of film supplies is taken, and additional film is ordered as necessary.

d. Checking for outdated supplies; returning them to Central Supply.
The performer checks the date on the tape on the sterile wrapping which tells the performer the date after which the equipment can no longer be considered sterile. Any outdated supplies are then unwrapped and put in the Central Supply basket. These items are added to the requisition of supplies needed.

10. Taking a routine X ray, including:

a. Checking the patient's identification
With in-patients, the performer checks their wristbands, the requisition and, if necessary, the Log Book to make sure that the name is correct. With out-patients, the performer checks the requisition with the secretary.

b. Measuring the size of the patient
A ruler is used to measure in centimeters the width of the part of the body to be x-rayed. This measurement is a factor in the selection of the proper technique.

c. Centering the patient to the table, the film to the patient, and centering the tube on the area to be x-rayed.

The patient is centered according to the centering lines on the X-ray table. Then the Bucky (see below) is slid back and forth in order to center the film on the part of the patient to be x-rayed. The tube head is then moved by the handles until it is directly over the part to be x-rayed. The collimator or shutter is also adjusted so that the radiation hits only the area to be x-rayed.

d. Inserting the cassette into the Bucky

The unexposed film which is in an aluminum casing, called a cassette, is placed in the table drawer (or tray) underneath the area to be x-rayed. The tray is called the Bucky.

e. Selecting a technique on the control panel (appropriate quantity or milliamperage; length of exposure; penetration or KV)

The technique depends on the measurement of the body part (width and thickness), the distance from the cone to the area, the age of the patient, the type of examination and whether there is any added draperage or material between the body part and the X-ray machine (e.g., a cast). A milliamperage chart is consulted to determine the proper strength. The performer then adjusts dials or pushes buttons to select the proper technique.

f. Instruct patient through microphone to take and hold a deep breath

A microphone, set up outside the closed door to the room, allows these instructions to be given. The performer presses a lever on the microphone down and talks to the patient; by releasing the lever, the performer can hear anything the patient says in reply.

g. Assisting patient in getting off table and into wheelchair or onto stretcher

The patient's condition determines the number of performers needed to move him from the X-ray table to the wheelchair or stretcher. Refer to Nursing Appendix, Function #23, for the procedure of moving a patient from the table to a stretcher.

h. Labeling X-ray film, taking it to developer.

The exposed film is taken from the X-ray room and inserted into wall cabinets in the dark room. These cabinets are arranged so that the exposed film can be inserted from outside the dark room and taken out from inside the dark room. Special locks prevent the cabinet doors from being opened from both the inside and outside at the same time, in order to prevent the film from being exposed to light. In the dark room, a special device is used to imprint the patient's name, date and X-ray number on the corner of the film.

11. Developing X-ray films:

a. Inserting exposed film into processor

The processor is automatic, so the performer simply feeds the film into the machine. The majority of the films are completely developed and dried in 90 seconds (exception: mamography. The performer adjusts the developing time dial to 3½ minutes).

b. Removing developed film

The film automatically comes out of the processor and drops into a tray. The performer picks it up from the tray.

c. Labeling, recording or distributing film to appropriate persons

Refer to Function #8c.

d. Replenishing supply of film in filming drawer.

Boxes of unexposed film are obtained from the central storage area in the department and handed through the wall cabinets. The films are then arranged on shelves or inserted in a bin in the dark room.

12. Go to the Operating Room to take an X ray with a portable X-ray machine, using sterile technique.

For most X rays done in the operating room, the performer uses the portable X-ray machine, the lead aprons and the Polaroid cassettes, all of which are already in the operating room. If the area to be x-rayed is larger than 10" by 12" the performer takes cassettes from the department. If the X-ray examination requires two simultaneous films (e.g., a hip-nailing), the performer takes another portable X-ray machine with him from the X-ray department.

First, the Polaroid X-Ray Developer is plugged into an electrical outlet outside the operating room; then the performer wet-wipes the machines and cassettes with mixed sanadril. The performer then puts on operating room attire (mask, gown, cap) and takes the equipment into the room. The cassette is set into a metal tray, slid into the space under the table, and pushed with a ruler until the performer estimates that it is in the correct position under the area to be x-rayed. This is usually done from the bottom end of the operating table in order to avoid a break in the sterile field. The portable machine is then plugged in, rolled to the bottom end of the table, and adjusted so that the tube is directly over the area to be x-rayed. Operating room personnel are then instructed to leave the room, so that they are not exposed to radiation; those who must stay (such as the anesthesiologist) are given lead aprons to put on. The performer then puts on a lead apron and, if possible, takes and develops a "scout film" to check her positioning of the cassette and her technique selection (the technique is determined by the same factors as in a routine X ray). As many films as necessary are taken, after which the performer removes her lead apron, takes the cassettes outside the room, inserts them into the Polaroid X-Ray Developer, and closes the lid. When the film is developed (45 seconds), a buzzer sounds. The performer then lifts the lid and removes the developed film. The operating room cassettes are reloaded with unexposed film for the next X ray. Cassettes from the X-ray department, used for the reasons described above, must be returned to the X-ray department for developing. In that case, two performers usually go to the operating room, so that the performer taking the X ray will not have to change out of her operating room attire to take the film back to the X-ray department to be developed. The developed X ray is then hung on the light screen in the substerile area between operating rooms for the doctors to view.

13. Go to the floors to take X ray with a portable X-ray machine.

    The portable machine, the cassettes and the lead apron are taken to the patient's room by a performer from the X-ray department. The procedure for taking the X ray is the same as that described in Function #10, except the cassette is put directly behind the patient. The equipment is then taken back to the X-ray department, where the film is developed.

14. Mixing and administering (under physician's directions) barium enemas or or barium meal.

    In the morning barium (powder) is mixed with water in a blender according to the directions on the package. The quantity mixed depends on the number of patients booked for the day. The mixed barium may have to be stirred again before being administered to keep it in an adequate suspension (otherwise, the barium settles to the bottom). Barium meal is used for studies of the esophagus and the stomach; a barium enema is used for studies of the lower digestive tract. The patient, lying down, drinks the barium enema through a straw. The procedure for administering the barium enema is the same as that described for a cleansing enema (refer to Nursing Appendix, Function #27a). The physician determines the amount of barium to be administered (depending on when the stomach or the lower digestive tract becomes full).

15. Assisting physician in fluoroscope examination:

    a. Getting necessary equipment and supplies

    Knowing in advance what type of fluoroscopy will be done, the performer brings all of the necessary supplies and equipment to the room and sets them up by arranging them on the shelves. What supplies and equipment will be needed depends on the procedure (example: barium meal, cup, straw, emesis basin and so on for an upper gastro-intestinal series). The requisition and the patient's history along with lead-lined gloves and a lead apron for the physician are brought to the room.

    b. Adjusting cameras, table, television screens, patient and overhead and side tubes

    Positioning the patient, tube, collimator, cassettes and so on is done as for a routine X ray.

    c. Inserting appropriate film.

    The technique, although selected according to the same factors as those described in Function #10, differs because the performer is required to take a series of films in rapid succession.

16. Assisting physician in special procedures (selective arteriograms, aortagrams):

    a. Getting necessary equipment and supplies

    The day before the special procedure, if possible, the patient is brought to the special procedures room; and a test film is run to check on the positioning of the patient and of the equipment and to determine the best technique. The 16mm. film must be checked to make sure it is not outdated. Notes are made of the test run so that a minimum of adjustments will have to be made during the actual procedure.

    b. Adjusting cameras, table, television screens, overhead and side X-ray tubes and the patient

    The equipment, instruments and supplies that will be needed are kept in the special procedures room; most of the instruments are wrapped in kits. What is needed depends on the procedure to be done; but usually it includes needles of different sizes, the solution to be administered into the artery, catheters, basins, towels, lead-lined gloves and sterile gloves, lead aprons and so on. During the procedure, in addition to his usual adjustments of the X-ray machine, the performer may be asked to adjust the television screens for darkness of image or to adjust the tabl height or the lights.

    c. Inserting appropriate X-ray film into magazine

    The magazine holds thirty sheets of film and must be loaded with the number of films to be used in the procedure. This loading is done well in advance of the procedure. Again, a large number of films are taken in rapid succession in order to follow the progress of the injected solution through the blood vessels.

d. Checking number of needles, catheters used and so on.

Following the procedure, all equipment used is accounted for (particularly needles). Cleaning up, taking inventory and restocking is done routinely, as previously described.

LABORATORY

LABORATORY TECHNICIAN

1. General

   a. Gather supplies, instruments and equipment in preparation for tests.

   The performer gathers the supplies, instruments and equipment he needs before each test.

   Bacteriology supplies include all culture media and staining material. The tubed culture media are stored in racks on the bench; the media in plates are stored in units of 10 in a 37° F. refrigerator in the department. The loops and alcohol burners are kept on the benches to be ready for use at any time. Slides for smears are kept on the bench or in an adjacent drawer. All agglutination tests are performed using a test kit which is commercially made up and stored in the refrigerator. Microscopes and lights remain on the bench at all times.

   All reagents for the Blood Bank are kept in the department refrigerators. All supplies are kept in drawers adjacent to where the technician sits to work. These supplies include slides, test tubes and pasteur pipettes. Centrifuges, microscopes and lamps are kept on the bench at all times.

   All chemistry supplies are found within the department. Any supplies needed for a particular test can be found in the area adjacent to where that test is performed. The department is divided into specific work areas, and all instruments are located in the area where they will be needed. Reagents are kept in the refrigerator or on a shelf at the particular test area. All pipettes, tubes, racks and other glassware are obtained from one location within the department.

All test tubes, racks and slides for cytology are stored within the staining area. Centrifuges, the only instruments needed, are also located in this area. A microscope and a light are kept on the cytologist's desk.

Hematology supplies such as pipettes, slides, tubes and racks are kept adjacent to the area in which the work will be performed. All reagents are kept in cabinets in the area or in the department refrigerator. The instruments used (centrifuges, microscopes and slide stainer) are arranged so that testing can be done in a series following a definite pattern.

All histology supplies are kept on shelving in the department with a small portion of each being at the area where the work is performed. Cups are kept in the embedding area; slides are kept in the cutting area; and dishes containing stains are kept in the staining area. All reagents used for staining or processing are stored on shelving in a closet within the department. The instruments (knife sharpener, microtome, microscopes and light, and water baths) are kept in specific areas on the benches so that the work can be done in a pattern.

All slides, racks and reagents for urinalysis are kept in drawers adjacent to the area where the work is performed. The only instruments - a centrifuge, microscope and a light - are kept on the bench.

b. Clean and put away equipment and supplies after use.

As many of the supplies as possible are disposable, and these are simply thrown in the trash. The trash is picked up each day and burned or disposed of by the maintenance personnel. Those items which are not disposable are left in buckets in central areas of the laboratory. These are collected at various intervals during the day by the housekeeping woman assigned to the laboratory. She takes the buckets to a glass washer and dryer located on the 7th floor. The glassware is sorted according to shape and like items are placed in a rack and put in the washing machine. Soap is added and the machine is turned on. The machine is an automatic cycled washer containing wash, rinse and distilled-water rinse cycles. Upon completion of the wash, the items are transferred to the dryer and heat dryed. After drying, these items are returned to the laboratory and distributed to each department and departmental area; maintenance workers put away these items.

All the equipment used is carefully cleaned by the person using it. This is usually done with water and a mild detergent or xylene, depending on the item. Xylene is used to remove paraffin in the histology department or to remove oil from the lens of a microscope.

c. Care for and maintan equipment.

Each department is immediately responsible for its own equipment, including general cleaning and minor repairs, if necessary. Major repairs may require calling the serviceman of the company involved. The majority of laboratory instruments are in the chemistry department, where there are daily and weekly check systems which are used to measure if the instruments are in working order. Chemistry and hematology instruments must be calibrated periodically, usually just before a test is performed using that specific instrument. Calibration is done using standards of known concentrations.

d. Check stock levels.

One person in each department is responsible for maintaining a check on the stock levels. In addition, the administrative assistant checks stock with each of the above personnel once a month. Each function performed is reviewed to check each item required in its performance.

e. Order and put away supplies, equipment and biological items.

Each department writes out its requirements in a log which is presented to the administrative assistant. The performer looks up each requested item in one of the various distributors' catalogs to obtain the dealer's stock number and to find the unit the dealer ships by. The items are then written out in requisition form, including the number requested, the unit, the stock number, the item and the company from which it is requested. This is then typed out in triplicate and signed by the administrative assistant. The requisition is forwarded to the business manager for approval and then to the accounts payable office. Here it is given a requisition number and typed in duplicate on a request form which is sent to the Purchasing Department, City Hall. One copy of the original request comes back to the laboratory; one copy is attached to the request going to City Hall; the third remains in the accounts payable office. The purchasing department assigns a purchase order number and then either forwards the request to the distributor or puts the items out on bid.

All stock is received in the hospital at the loading platform and distributed to the specific department. Upon receipt of supplies in the laboratory, the administrative assistant checks the items for correct amount and damage. The packing slip is signed and forwarded to the accounts payable office. The items are put away by the department that originally ordered them. The administrative assistant makes note of all receipts on his copy of the original request.

f. Record and report tests.

The results of each test are recorded on the original requisition. Each department also keeps a log on which the test results are recorded.

Each department has its own numbering system, so that each requisition and specimen are not only identified by name but also by number. The statistics for each department are tabulated monthly. Laboratory personnel write the report on the original requisition and in the log book and also stamp out requisition with report. The report is checked by the laboratory supervisor and given to secretarial personnel. The requisition is then separated: one copy (original) goes to the floor; and another is filed in the laboratory files.

g. Prepare standards and reagents.

Most reagents are obtained premade and checked from commercial companies; however, a few reagents are made in the chemistry department. If solid, they are weighed on an analytical balance and then reconstituted with reagent-grade distilled water or another liquid chemical. If liquid, they are properly diluted with the correct diluent. Equipment needed for this includes volumetric flasks, pipettes and a balance. Generally speaking, the standards used are commercial standards which have been lyophilized and must be reconstituted -- usually with reagent-grade distilled water. Standards made in the laboratory must be carefully weighed (to 4 decimal places) on an analytical balance or, if liquid, measured with a very accurate pipette and then diluted. With both the commercial and "home-made" standards, accuracy is of extreme importance, even in the measurement of the reconstituting fluid.

h. Draw blood (excluding Blood Bank):

(1) Outpatients

Outpatients' blood is drawn between 8:30 a.m. and 3:00 p.m., generally by the hematology and urinalysis technicians. The patient's arm is cleaned with an aseptic solution, the needle is inserted, and the required blood is drawn.

(2) Morning - daily orders

All technicians who can draw blood go to the floors in the morning for in-patient orders. The hematology technicians pick up any orders in the nursery or pediatrics later in the day. The procedure is the same as above.

(3) Afternoon - preoperative.

The laboratory is called when pre-operative blood orders are written by the doctors. The blood is drawn by the hematology or urinalysis technicians who must go to the floor sometime between 1:00 and 2:30 p.m. If orders are written after 2:30 p.m., the house officer must draw the blood himself and send it to the laboratory. The procedure is the same as above.

II. Bacteriology (includes mycology and serology)

a. Receive and process routine cultures.

When specimens are received in the laboratory, they are matched with their corresponding requisitions and taken to the bacteriology department. There, both the specimen and the requisition are assigned a bacteriology department number. Then, depending on the specimen (urine, blood, stool, sputum, wound swab, etc.), media is selected for planting. Planting is accomplished by introducing the specimen to the media by means of a wire loop or a cotton swab. All media, loops and swabs must be kept sterile so that the bacterial colonies that grow can only be from the specimen.

The innoculated media is then placed in an incubator which is set at 37°C. (body temperature). Some are placed in a candle jar because they need an increased CO_2 tension to grow. All specimens are incubated overnight, and most are examined the next day (spinal fluids are kept for 2 days, blood cultures for 10-14 days). If a pathogenic organism is discovered on further testing and subculture, an antibiotic sensitivity is set up.

b. Antibiotic sensitivity test.

The performer innoculates a sterile culture plate with the pathogenic bacteria, making sure to completely cover the plate. Small discs impregnated with different antibiotics are then placed on the plate, and the plate is put in an incubator. The following day it is removed and examined. The organism is resistant to an antibiotic if it grows up to and around the disc; it is sensitive if it will not grow up to the disc but leaves a "halo" around it.

c. Antibiotic blood level.

A suspension is made of the pathogenic organism which has been isolated from a patient. Serial dilutions of the serum of the same patient (who has been on antibiotics) are then made. The organism suspension is added to each tube of the serum serial dilution, and the tubes are incubated. The titre is the last tube where there is no growth.

d. Prepare and stain smears.

Smears may be prepared by the bacteriology department staff or may be sent already prepared by a doctor. Gram stain is most frequently used. Other stains are used for TB bacteria, diphtheria bacteria and fungi. Smear reports are then written.

e. Colony count.

Colony counts are performed to determine the severity of a urinary tract infection by roughly determining the number of bacteria per ml. of urine. A subculture is prepared from organisms already grown. This culture is streaked on a specially prepared medium and incubated for 24 hours; an estimate is then made of the colonies grown on this plate.

f. "C" reactive protein test.

This is a test used to detect the presence of inflammatory processes in patients having specific disease such as rheumatoid arthritis. The patient's serum and reagent antiserum are mixed in a capillary tube, which is placed in a rack in a 37^{0}C. incubator for 2 hours. The reading is made by measuring the amount of flocculation in the bottom of the tube.

g. Complement fixation test.

Generally performed for the detection of syphillis. The serum is heated to inactivation at 56^{0}C. Dilutions of this serum and guinea pig serum and sheep cells are made. The result is recorded according to the last tube showing hemolysis.

h. (1) Infectious mononucleosis, heterophile and monospot

(2) Heterophile presumptive and differential antibody test.

Monospot is a simple antigen - antibody agglutination test used to screen for infectious mononucleosis. The heterophile is performed to determine the titre (or severity) of infectious mononucleosis. It is performed by making serial dilutions of the patient's serum and adding the appropriate antigen system (sheep cells), incubating and reading. If hemolysis is present, this is a positive presumptive test. The differential test is then performed by absorbing the patient's serum with a guinea pig kidney and repeating the test. This will differentiate between infectious mononucleosis antibodies and serum sickness antibodies, which will both give a positive presumptive test.

i. Febrile agglutinin.

This term is used to represent a composite of fever-causing bacterial infections. Specified amounts of the patient's serum are combined with reagent serums and checked for agglutination.

j. Rheumatoid arthritis test.

The screening test for rheumatoid arthritis is a simple agglutination reaction between patient's serum and a specific commercial antigen. If positive, a titre is done by making serial dilutions of patient's serum and adding the prepared antigen system to each tube. A titre is determined by the number of tubes which show agglutination. This is called a latex fixation test because the antigen used is a system of latex particles which have been sensitized with human gamma globulin and are agglutinated in the presence of rheumatoid arthritic serum.

k. Strep MG test.

Patients convalescing from primary atypical pneumonia develop antibodies in their blood against a strain of non-hemolytic streptococci. This test is a simple agglutination reaction using patient's serum and strep MG antigens. Titres can be determined by serial dilutions of patient's serum.

l. Antistreptolysin "O" Titre.

The antibody, antistreptolysin - O, is present in the serum of at least 90 percent of all individuals who have had streptococci infections.

Dilutions of the patient's serum are united with antigen (streptolysin - O) and a rabbit red cell suspension is added to show whether an antigen-antibody reaction has taken place (hemolysis). If it has, the antibody (antistreptolysin-O) is present in the patient's serum. Titre is reported.

m. Pregnancy test.

Two methods are used for pregnancy testing, both based on the principle that pregnant women excrete HCG (human chlorionic gonadotropin) in their urine.

(1) Gravindex - latex agglutination inhibition test. Sample of patient's urine is mixed with a latex antibody-antigen system. If HCG is present, it will tie up the antibody present and inhibit its agglutination of the latex particles.

(2) Pregnostion - hemagglutination inhibition.

The HCG in the urine of a pregnant woman will inhibit the agglutinati of antibody and red cells. Two different patterns are formed in the bottom of the test tubes due to the agglutination reaction.

n. Sperm count.

Test for fertility or sterility. A fresh specimen of semen is received and introduced onto a counting chamber. The sperm are then counted, and abnormal forms of spermatozoa are sought.

o. Prepare culture media.

On occasion, when prepared culture media is late in arriving, the department prepares its own. This generally consists of dissolving powdered media in distilled water and dispensing into the proper culture containers. Media are selected according to the organism which will be studied.

p. Cultivate mycology specimens and examine mycology specimens microscopically.

Mycology specimens are innoculated on mycology media - one is incubated; the other is kept at room temperature. They are kept for 14 days and inspected daily for fungal growth. When growth occurs, a sample is taken and made into a wet mount for microscopic examination. Fungal morphology characteristics are the most important aspect of fungus identification.

III. Blood Bank

a. Attach serial number to units.

Serial numbers are preprinted in a numerical series. One copy is put on the blood bag; one, on the pilot tube; one, on the serology tube; and one, on the donor card.

b. Store blood according to grouping and factor.

Blood is stored in blood bank refrigerator which is carefully controlled for temperature. It contains 5 shelves - one for crossmatched units, and the others for grouped but uncross-matched blood.

c. Prepare blood for shipment.

This involves packing the blood in dry ice.

d. Dispose of blood after time limit.

Blood is disposed of after 21 or 28 days, depending on the type of anticoagulant which is used. Whole blood is split, and the plasma is sent to the State Laboratory.

e. Screen and process blood donors.

This involves taking the pulse and blood pressure of prospective donors and performing hemoglobin test; it also involves going over a checklist of possible diseases or reactions that donor may have had.

f. Draw patient's blood for grouping, typing and crossmatching.

Patient's arm is cleaned with an aseptic solution; the needle is inserted; and the required blood is drawn.

g. Draw blood from donors.

The donor's arm is cleaned with an aseptic solution, and the needle is inserted. The donor must be kept at ease and comfortable while his blood is drawn; the procedure may take from 7 to 20 minutes.

h. Perform direct and indirect Coombs test.

This is a test for self-hemolysis (destruction of red blood cells). The patient's red cells are washed with saline. Direct test: Coombs serum is added to the washed cells and centrifuged. It is read macroscopically for agglutination. Indirect test: Coombs serum is added to the washed cells, incubated, centrifuged and read macroscopically.

i. Group and type blood of donors and recipients.

Samples are centrifuged, and the serum is removed. The tubes to be used are properly labeled. Pre-made typing sera and cells are put in the labeled tubes. Donor's serum is added to the cells. Patient's and donor's cells are added to the typing sera; then are centrifuged and read macroscopically.

j. Antibody screen.

Cells are added to patient's serum for detection of antibodies.

k. Cord blood.

Blood received from the umbilical cord is typed; Rh and Coombs tests are performed.

l. Cold agglutinins.

This is to test for an antibody in the plasma which causes abnormal hemolysis when the blood is cooled. Specimen cells are placed in a tube with saline. A serial dilution is performed using saline as a diluent. The tubes are refrigerated for 2 hours and then checked macroscopically for hemolysis. If negative, the tubes are refrigerated for 22 more hours and again read macroscopically.

m. Rapid Hinton.

This is a test for syphilis. Serum of specimen is placed on a cord. An antigen is added and the cord is rotated mechanically for 10 minutes. The circle on the cord is read for agglutination.

n. Rho Gam Studies.

Rho Gam is a medication given to Rh negative mothers when the child is Rh positive. The mother's cells are cross-matched with typing sera contained in a pre-made kit. If compatible, Rho Gam is administered. The study involves typing blood and performing the Coombs test on both mother and child.

o. Rh Genotype.

This test is performed to find the specific Rh type. A patient's cells are added to typing sera, centrifuged and read macroscopically.

p. Crossmatch blood.

This is a test for compatibility of blood between donor and recipient. Four tubes are set up and labeled with contents as follows:

1) "Major Albumin"- patient's serum, donor's cells and albumin;
2) "Major Saline" - patient's serum, donor's cells and saline;
3) "Minor Albumin" - patient's cells, donor's serum and albumin;
4) "Minor Saline" - patient's cells, donor's serum and saline.

All 4 tubes are centrifuged and checked macroscopically for agglutination. They are then incubated for 20 minutes, centrifuged and again checked macroscopically for agglutination. If negative, the saline major and minor are thrown out, and the remaining tubes (major and minor albumin) are washed with saline three times. Coombs serum is then added; the tubes are centrifuged and read macroscopically.

q. Fractionate blood products.

The unit of blood is centrifuged (if necessary) and placed in pressure apparatus. A Transpak system is introduced into the blood bag. The pressure system is released and the plasma flows to the Transpak. As the cells reach the Transpak, the unit is clamped off. The Transpak bag is then labeled.

r. Rh Titre.

This is normally done in pre-natal workups to spot a possible reaction between mother's cells and fetal cells, which usually occurs when an Rh negative mother is carrying an Rh positive child. Two sets of serial dilutions are set up, each containing two tubes. The patient's serum and antibody cells are added to the first tube in each set. A serial dilution is performed: in one set saline is used as diluent; in the other albumin is used. These are centrifuged, incubated and centrifuged again. Coombs serum is added; the tubes are centrifuged again and read macroscopically.

s. Follow-up transfusing reactions.

Possible reactions might take the form of chills, fever or rash. A new blood specimen and a urine specimen are taken from the patient. Both the old and the new specimens are crossmatched with the pilot tube and the blood remaining in the blood bag. Urine hemoglobin and plasma hemoglobin tests are performed. A direct Coombs test is performed on the new sample.

IV. Chemistry

1. Cephalin Flocculation.

   Generally this is a liver function exam, but a reaction will occur with other diseases associated with abnormal levels of plasma proteins. The patient's serum is diluted with saline and added to an emulsified mixture of cholesterol and cephalin.

   Varying degrees of flocculation (fleecy mass) occur and are reported at 24- and 48-hour periods.

2. PH urine.

   A routine exam for urinary acidity or alkalinity with little or no clinical importance unless special therapeutic or dietary regimen is being observed. A test strip is introduced into the urine sample and the result is dependent upon color reaction.

3. Protein, total.

   This is primarily a liver function exam; however, total protein will also be affected by malnutrition, hemorrhage, dehydration or hyperglobulinemia.

   A drop of patient's serum is placed in a refractometer, and a direct reading is observed.

4. Protein, qualitative urine.

   This is important in such pathological conditions as circulatory changes, irritations of the kidney and organic changes of the kidney. A test strip is immersed in a urine sample, and the result is determined by color change.

5. Specific gravity.

   This is performed to indicate the amount of dissolved solids in urine. A drop of patient's urine is placed in a refractometer, and a direct reading is observed.

6. Albumin:

   This is used to determine if albumin is present in urine, due to pathological conditions, irritations of the kidney, circulatory or organic changes in the kidney.

   a. Qualitative

      A test strip is immersed in a urine sample, and the result is determined by a color change.

   b. Quantitative.

      A sample of urine is placed in a test tube. A reagent is added and allowed to stand for five minutes. The degree of turbidity is compared to known standards.

7. Albumin and globulin.

   Generally this liver function test is done in conjunction with total protein. Hemorrhaging and multiple myeloma are other possible reasons for performing these tests.

   The result for globulin is obtained by adding patient's serum to saline and ghatti gum. Ammonium sulfate is then added slowly; and after standing

12 minutes, the test is read in a colorimeter. The result is obtained from a standard curve. The albumin is determined by subtracting the globulin result from the total protein.

8. BSP (Bromsulphalein).

This is a liver function test which determines the amount of dye excreted into the blood in a specified time. The patient is injected (by doctor) with a Bromsulphalein dye; and 45 minutes later, a blood sample is drawn. The patient's serum is then added to a reagent and allowed to stand for 5 minutes. The test is read in a colorimeter, and the result is obtained from a standard curve.

9. B.U.N. (Urea Nitrogen).

Generally this is a renal function test whose chief value is in detecting and following impaired excretion in kidney disease. The serum is placed in a cup on the autoanalyzer behind known standards. The reagents are run through the lines, and the standards and serum are drawn through at one-minute intervals. A curve is drawn from the standards, and the test result is read from this curve.

10. Calcium:

This test is of excellent value in following a patient after a parathyroidectomy to be sure his calcium intake is sufficient. It will also determine whether hypocalcemia is the cause of convulsions.

a. Qualitative Urine

Equal parts of urine and reagent are mixed in a test tube and allowed to stand for 2 to 3 minutes. The result is determined by the amount of precipitate formed.

b. Quantitative.

The urine sample is diluted 10 to 1 with distilled water and added to a reagent. A second reagent is titrated into the sample against a fluorescent background. An endpoint is observed; a reading, taken; and the result, computed.

11. Chloride.

Chloride is an anion (negatively charged ion) whose exact importance is not known. It does play an important role, however, in the buffering action of oxygen and carbon dioxide.

The process used is an electrometric titration. Serum is added to a reagent; an electric current is passed through; and a reaction occurs. This equipment gives the result in a direct readout.

12. Gastric contents.

This is an examination to measure the amount of acidity in the gastric juice.

A measured amount of filtered gastric juice is placed in a beaker, and a reagent is added; a color change may or may not occur, depending on the acid. If acid is present, a titration is performed; and a quantitative result is obtained.

13. Hemoglobin, plasma.

This test may be done to detect hemolytic anemia, intravascular hemolysis and nocturnal hemoglobinurias. It is also done for hemolytic transfusion reactions.

Nine parts of plasma are overlaid with ether. One volume of reagent is added and throughly mixed. The contents are poured into a hand spectroscope, and an absorption band appears if present.

14. Occult blood.

This is generally done to aid in the diagnosis of gastric carcinoma or peptic ulcer, but the test will also be positive in cases of malignant disease of the bowel, in the presence of an intestinal parasite or in other pathological conditions.

A fecal specimen is placed on a mat, and a tablet is placed on the specimen. A drop of water is allowed to flow over the tablet, causing a color reaction.

15. Thymol turbidity.

This is primarily a liver function test, but it may also be used in diagnosing other diseases which cause abnormality of plasma proteins.

Serum is added to a reagent and allowed to stand for 30 minutes. The resulting degree of turbidity is checked against known standards.

16. Amylase.

This is done primarily in cases of pancreatic disorder. Renal insufficiency will also increase amylase.

The patient's serum is added to a reagent and incubated for 7½ minutes. Distilled water and a second reagent are added, and the test is read in a colorimeter. The value is found by computation.

17. Bilirubin.

This is primarily a liver function test.

The patient's serum is first diluted with distilled water. Then, part of the dilution is added to a reagent and water; and part is added to a reagent and alcohol. These are allowed to stand for 5 to 30 minutes and are then read in a colorimeter. The results are obtained from a standard curve.

18. Carbon dioxide.

Carbon dioxide is an anion (negatively charged ion) which is necessary for maintaining the acid-base balance.

Patient's serum is introduced into a Van Slyke apparatus. A reagent is added, and this combination is mixed under vacuum conditions. A reading is taken by barometric pressure, and the value is computed.

19. Gastric Analysis, Diagnex.

This is indirect method of detecting the presence of free hydrochloric acid.

The patient is given a gastric stimulant, and a specimen of urine is collected one-half hour later. The dye resin compound is taken, and two hours later a second urine sample is collected. The two-hour specimen is then compared with a known standard.

20. Glucose

This test detects hyper- or hypo-glycemia

a. Serum and CSF

Patient's serum is placed in a cup on the autoanalyzer behind known standards. Reagents are run through the lines, and the standards and serum are drawn through and mixed with the reagents at one-minute intervals. A curve is drawn from the standards and the result is read from this curve.

b. Urine qualitative

A test strip is immersed in a urine sample; the result depends on a color change.

c. Glucose tolerance test (3 hours)

Fasting serum and urine samples are collected and the patient is given 100 grams of glucose to drink. Serum and urine samples are again collected after one-half hour, one hour, two hours and three hours. The test is then performed as in part a. (Serum and CSF).

d. Glucose tolerance test (longer than 3 hours).

The same procedure is used as in (c) above, except specimens are collected for longer periods of time.

21. PH Blood.

This is an important examination of the acid-base relationship; more specifically, it is the concentration of the hydrogen ion. After the machine is set with known buffer solutions, blood is drawn into a temperature-controlled electrode.

A direct reading is observed on the meter.

22. Phosphatase, acid.

This test is used primarily to detect abnormalities of the prostate gland but is also found in erythrocytes and platelets. Substrate is placed in two test tubes and incubated for 10 minutes. Distilled water is added to one tube and serum to the other; both are then placed in a water bath for 30 minutes. A second reagent is then added, and the tubes are removed from the water bath and read in a colorimeter. The value is determined from a curve.

23. Potassium.

Potassium is the major cation inside cells; and as such it is important in the electrolyte balance.

The patient's serum is diluted with a reagent; and with an I.L. flame photometer, the specimen is atomized into a flame. The value is given in a direct readout.

24. Protein, CSF.

A Protein, CSF examination is used to determine any of a large number of pathological conditions.

A spinal fluid specimen is added to a reagent and allowed to stand for five minutes. The test is read in a colorimeter, and the value determined is from a curve.

25. Salicylates.

This is a test to diagnose a possible overdose of certain medications. The patient's serum is added to a reagent, mixed and allowed to stand for five minutes. The test is read in a colorimeter, and the value is calculated.

26. Sodium.

Sodium is one of the cations that maintain the electrolyte balance. The patient's serum is diluted with a reagent; and using an I.L. flame photometer, the performer atomizes the specimen into a flame. The value is given in a direct readout.

27. Urea clearance.

This is done to determine the ratio of urinary excretion to the average blood level. The test correlates directly with the progress of kidney disease and shows a deviation from normal earlier than any other examination.

The patient is given 8 milliliters of water per kilogram of body weight. The patient voids, and the first specimen is discarded. Thirty minutes later, a blood sample is collected; and the patient voids again thirty minutes after that. B.U.N. test is then run (see #9). The urine is diluted 1 to 100 with water and run in the same manner. The value is arrived at by calculation.

28. Uric acid.

This examination shows elevation in gout, familial hyperuricemia, kidney disease, toxemia of pregnancy and in leukemia and other diseases involving breakdown of nuclear material.

A protein-free filtrate is made with the patient's serum, a portion of which is then added to a reagent. A second reagent is added, and the test is allowed to stand for 15 minutes. The test is read in a colorimeter and the value is obtained from a curve.

29. Urobilinogen.

This test is used to determine the ability of the liver to function properly and to detect excessive destruction of blood. A series of 10 test tubes are set up and 5 ml. of water is pipetted into all but the first tube. Five ml. of urine are then added to the first 2 tubes, and serial dilutions are performed through the remaining 8 tubes. A reagent is then added to all tubes and allowed to stand for 5 minutes. The color is observed, and the last tube dilution with color in it is reported.

30. Spinal fluid, complete examination.

Since a spinal tap must be done, enough fluid is collected to perform a series of tests to diagnose any pathological condition associated with the spinal column and brain.

Protein, glucose, chloride, cell count, serological and bacteriological studies are all performed by standard methods described elsewhere in this Appendix.

31. Osmolarity.

This test determines the osmotic effects of both the anions and cations present in the blood.

A urine or serum sample is placed in a cup on an osmometer. The specimen is then frozen and a count of particles is made electronically. The result is given in a direct readout.

32. Cholesterol.

Determination of the cholesterol level is widely used in the diagnosis of hepatic disease. This level is also increased in hypothyroidism, nephrotic syndrome and untreated diabetes and arteriosclerosis.

The patient's serum is placed in a test tube with an extraction reagent and is centrifuged. The supernatant is drawn off and 2 more reagents are added. Heat is generated, so the tubes must be allowed to cool. The test is read in a colorimeter, and the value is then calculated.

33. Cholesterol total and esters.

Same as above, except to arrive at esters result, digitonin is added to the supernatant.

34. Colloidal gold.

This is a test for syphilis and certain pathological conditions of the nervous system. It is, in effect, an albumin-globulin ratio which is being detected.

Spinal fluid is mixed with a colloidal solution of gold. Tubes are read depending on the color change.

35. Creatine.

This is a kidney function test; creatine is increased in starvation, muscle wasting, pregnancy and hyperthyroidism.

A filtrate is prepared with serum or urine. A portion of this filtrate is placed in a test tube, and a reagent is added. It is then heated in an autoclave or boiled for one hour. Water and a second reagent are then added. The test is read in a colorimeter, and the value is calculated.

36. PCO_2 and PO_2.

These tests are done to check the acid-base relationship of blood.

Arterial whole blood is the sample of choice.

An I.L. gas analyzer is used, and known gases are used to set the machine. These gases are passed by the electrodes, and the values are set on the meter. A sample of blood is placed in the chamber, and a direct readout is observed on the meter.

37. Phosphatase, alkaline.

This is primarily a liver function exam, but elevated levels also occur in patients with bone disease.

Serum is added to a substrate and incubated for 30 minutes. A color developer is added; and the test read, in a colorimeter. The value is found on a standard curve.

38. Platelet antibody.

A platelet antibody transmitted from the mother through the placenta may cause transitory thrombocytopenia. The platelet count is the test to be done in suspected cases of platelet antibodies.

39. Transaminase (SGO-T).

This is primarily an examination for heart or liver diseases. Muscle disease or inflamation of the skeletal system will also cause elevated results.

Two tubes are set up, one containing substrate and water and the second containing substrate and serum. The tubes are incubated for 30 minutes, and a color developer is added. The results are read in a colorimeter, and the value is obtained from a standard curve.

40. Transaminase (SGP-T).

The procedure is basically the same as #39 with a change in reagents being the difference.

41. Creatinine clearance.

Primarily this is a renal function test which determines the rate of filtration.

The patient voids, and the specimen is discarded. One hour later, the patient voids again and this urine sample is used. A blood sample is also drawn. A filtrate is made of the blood, and the urine is diluted

100 to 1. A reagent is added to a portion of both the filtrate and the diluted urine. A second reagent is added, and the tubes are allowed to stand for 10 minutes. The results are read in a colorimeter; the values, determined and the clearance, computed.

42. Red cell survival.

This is used primarily to follow pernicious anemia for red cell longevity. Blood cells are tagged with sodium chromate and a small amount of Cr^{51} and transferred to the patient. A sample is drawn after 24 hours and twice a week for the next three weeks. The samples are read in a scintillation well with a spectrometer.

43. Schilling test.

This procedure is useful in classifying megablastic anemias and will also detect defects in intestinal absorption. The patient is given $CO^{60}B_{12}$ orally.

One hour later a "flushing dose" of B_{12} is administered intramuscularly by a doctor. All the urine voided in the next 24 hours is collected and measured. A small portion is then placed in a tube, and the tube is placed in the scintillation well. The volume is found through a calculation

V. Cytology

a. Maintain file card on each patient.

A file card is typed for each patient indicating the report sent out. These are filed with pathology file cards. In addition, a separate file is kept of positive cases which includes the smears, surgical and/or treatment information, and any follow-up smears.

b. Number and prepare smears:

Labeled specimen and properly completed requisition must be received for cancer screening or other procedures to be done. This includes: source of specimen, clinical diagnosis and a short patient history. A smear and its corresponding requisition are given a number. These numbers are consecutive for an entire year starting in January.

1. Non-gynecological smears

Non-gynecological smears are from any source other than the female genital tract. The most common ones are urine, sputum, buccal scraping, centesis fluid, and breast secretion. The procedure involves centrifuging, separating and smearing.

2. Pap smears.

Pap smears are smears taken by a doctor from the female genital tract for cancer screening. Some doctors do only vaginal smears, others do VCE (vagina, cervix, endocervical) smears.

c. Stain and mount smears:

1. Non-gynecological smears.

   The Papanicolaou stain is used for non-gynecological smears. Depending on the case, there may be 2-6 smears. The slides are put in a slide holder and are passed through a series of about 20 solutions, 3 of which are the actual stains. About 25 slides can be stained at once. After staining, the slides are mounted by coverslipping with permount.

2. Pap smears.

   Same as above, except there usually is only one smear instead of 2-6.

d. Screen smears for cellular changes.

This is the basic purpose of cytology - to screen for cellular changes which would indicate cancer in a patient. Screening is done under a microscope, using both low and high powers. The entire smear is screened and suspicious or positive cells are marked with a block marker directly on the slide.

e. Hormonal studies.

Hormonal studies are performed on a vaginal smear and stained by the Papanicolaou technique. By studying microscopically the type of cells present, it can be determined if a hormone (estrogen) is being produced and to what extent.

f. Sex chromatin studies.

Sex chromatin studies are done on scrapings of the buccal cavity (inside the mouth), usually of children. By studying microscopically the cells present, it can be indicated if the patient is truly male or female.

VI. Hematology

a. Stain blood smears:

Blood smears are stained to permit an accurate differential count of white cells and so that red cell morphology can be studied.

1. By hand

Whole blood is placed on a slide and smeared. A stain (Wrights) is poured over the slide and allowed to stand 3-5 minutes. A buffer solution is carefully poured on top of the stain and allowed to stand 1-3 minutes. The slide is then washed off with water and blotted dry.

2. Using automatic staining machine.

Whole blood is placed on a slide and smeared. The slide is placed on its side in an Ames staining machine. Stains are applied automatically as each slide passes a certain phase on the machine.

It is believed that an intelligent study of the stained film, together with an estimate of the hemoglobin concentration, will yield 90 percent of all diagnostic information obtainable by examination of the blood.

b. Identify:

1. Immature blood cells

The parent cell, or precursor of all cells, is the mesenchymal cell which is a fixed tissue cell, not a blood cell. This cell has the capacity to develop into any other cell. The pronormoblast and the normoblast through the reticulocytes are all immature red cells. Each of these has slightly different characteristics along the road to maturity, which is eventually the erythrocyte. In the white cell series, the myeloblast and promyelocyte lead to the granulocyte series. The lymphocytic reticulum cell leads to the lymphocytes. The monoblast leads to the monocyte. The differences from cell to cell in the maturation process are very small but must be identified by the observer. This procedure involves observing stained smears.

2. Morphological variations of blood cells.

   Stained smears are examined microscopically. The size, shape and structure of the red cells is observed. An estimate of the hemoglobin content is made.

c. Bleeding and clotting tests:

   1. Capillary fragility tests

      This test measures the time required to stop bleeding after a standardized puncture wound is made in the finger or ear lobe. A single, hard stab is made using a lancet. Every half minute thereafter, a filter paper is touched to the wound until bleeding has stopped. The time required for bleeding to stop is recorded as the result.

2. Clot retraction

This test is performed to measure the platelet function in clotting. A sample of venous blood is placed in a tube, and note is taken of the time needed to clot. The sample is then placed in 37°C. incubation and checked until the clot has completely retracted. This time is reported as the result of the test.

3. Prothrombin time and prothrombin consumption tests

Blood contains various factors which produce coagulation. These factors cause specific reactions, and the prothrombin time includes several of these factors.

A brain thromboplastin, 0.2 ml., is incubated at 37°C. for five minutes. Blood plasma, 0.1 ml., is blown into this tube; and the tube is shaken gently until a clot occurs. This time is recorded along with the time of the control.

4. Thromboplastin generation

This test provides a means of determining deficiencies of factors V, VIII, IX, X and XII. These are some of the factors which generate thromboplastin in the first stage of hemostasis.

All reagents are incubated at 37°C. 0.2 ml. of four of the reagents are mixed. After 2 minutes, 0.1 ml. of generation mixture is added to the first tube containing calcium chloride; 0.1 ml. of plasma substrate is then added. The tube is mixed until a clot appears, and time is recorded. The process is repeated at 4 and 6 minutes.

5. Fibrinogen estimation

Fibrinogen is a globulin that is converted to fibrin in the presence of thrombin.

Plasma is diluted 1 to 8 with sodium chloride. 0.1 ml. of the diluted plasma is added to a reagent and allowed to stand for 5 minutes. The clot is then observed and reported according to solidity.

6. Partial thromboplastin.

This test is done as an investigation of hemophilic plasmas. 0.1 ml. of platelet factor reagent is placed in a tube. 0.1 ml. of patient's plasma is added and incubated 1-2 minutes. 0.1 ml. of calcium chloride (0.025N) is then blown in. The time required for clot formation is read.

d. Erythrocytes (red blood cells):

1. Hematocrit

This test is done to determine the volume of red cells packed by centrifugation.

Whole blood is placed in a capillary tube containing heparin. The tube is sealed on one end and placed in a micro-centrifuge and spun for 4 minutes. A special millimeter ruler is used to read the result.

2. Erythrocyte fragility

   Destruction of the red cell is accelerated in certain diseases. This test is done to ascertain the rate of destruction. Varying concentrations of sodium chloride are made up. 0.1 ml. of each concentration is placed in separate tubes. The same amount of whole venous blood is placed in each tube. The tubes are shaken gently, and the tube with hemolysis is reported.

3. Erythrocyte sedimentation rate

   This test is used to measure the suspension stability of red cells. It is a rough measure of abnormal concentration of fibrinogen and serum globulins.

   A special tube, 110 mm. long with a bore of 3 mm. and graduated in millimeters, is filled with whole blood. After standing for one hour, the amount of fall is read (in millimeters).

4. Erythrocyte indices.

   The indices are important measures for classification of anemias. The procedure requires performing various calculations from the hemoglobin, hematocrit, and red cell count.

e. Blood cell counts:

1. Red blood cell count

   This count is done for the detection of anemias.

   Venous or capillary blood is drawn into a pipet and diluted with a reagent. The pipet is shaken for one minute. Three drops are allowed

5. Eosinophil count.

This count is done to aid in the diagnosis of allergic disorders, skin disorders and parasitic infestations.

The procedure is the same as the white cell count, but a special diluent is used.

f. Sickley cell preparation.

This test is performed to identify the sickle cell which is a pure hemoglobin disease.

A drop of capillary or venous blood is placed on a slide, covered with a coverslip and the edges sealed with petrolatum. It is then incubated at room temperature. The preparation is examined at intervals for the presence of sickles for several hours and after 24 hours.

g. Spinal fluid cell count and differential.

These tests are done routinely to aid in the diagnosis of diseases of the spinal cord and certain infections.

The cell count is done by drawing spinal fluid and diluting fluid up to a particular mark in a pipet. This is shaken, and all cells in all squares on the hemacytometer are counted.

The differential is stained with methylene blue and counted the same as a blood smear.

h. Spinal fluid hematocrit.

This test is done to estimate the volume of red cells which may be present in the spinal fluid.

Same procedure as d, #1.

i. L.E. preparation.

This test is done to locate, if present, a substance in the gamma globulin fraction of the serum called the L.E. factor. A drop of patient's serum is placed on a slide. A drop of substrate is added, and the two are mixed. A positive or negative reaction will occur.

j. Leukocyte alkaline phosphatase.

This determination has proved of some limited clinical application. It is used to diagnose myelocytic leukemia, chronic lymphocytic leukemia, nonleukemic leukocytosis and myeloproliferative disease. A film of fresh blood is made and air-dried. The film is immersed in a fixative for 30 seconds and washed in running water for 10 seconds. It is then incubated in a substrate mixture for 10 minutes at room temperature and washed again for 10 seconds in running water. It is then counter-stained for 3-4 minutes, washed again, air dried and observed microscopically.

VII. Histology

a. Prepare specimens for processing.

Specimens are collected from the operating room and taken to the histology laboratory, where they are assigned a number (consecutive for a year, starting in January), examined and submitted for processing. Autopsy specimens are handled in the same manner. The specimens are placed in casettes and hung on the auto technicon. The auto technicon is a machine which processes the tissues by moving them through various solutions which fix, dehydrate and clean the tissues. This procedure is carried on overnight.

b. Embed tissue in paraffin.

In the morning the tissues are taken off the auto technicon and are embedded in paraffin. This is performed with the aid of the Tissue-tek, which has a hot paraffin dispenser and cool areas for solidifying the paraffin. The tissue is placed in a small metal "boat" and the paraffin is added to the tissue. When cooled, the block of embedded tissue is taken out of the metal boat to be cut.

c. Section tissue in microscopic blocks.

Tissue cutting is performed on the microtome. The block of embedded tissue is placed in a small opening in the front of the microtome. Adjustments are made for centering and setting in the proper perspective to the plane of the knife. The arm containing the specimen is advanced while actually cutting the paraffin down to the area intended to be used as a section. A flywheel advances the arm so that each section has a width of 3-5 microns. The "ribbons" of tissue sections which come off the knife of the microtome are floated in a warm water bath. A good section is selected and is picked up on a slide which has been pre-smeared with albumin. This is done so that the tissue section will adhere to the slide.

d. Prepare stains:

1. Routine stains

The hematoxylin and eosin for the routine stain is made up monthly. Specific amounts of potassium alum and alcohol are mixed to make the hematoxylin. An aging process of 6 months is preferred for this stain. Specific amounts of eosin-y stain are mixed with alcohol. No processing is needed for this stain.

2. Special stains.

Special stains are used to bring out special materials or characteristics of a tissue such as connective tissue, amyloid, bacteria, iron, etc. Special stains are made up as needed and involve a variety of processes similar to those above.

e. Stain specimens.

The slides are stained with a routine hematoxylin and eosin stain. The slides are dropped in a series of 12 dishes containing xylene, alcohol (various strengths), water, hematoxylin stain, a neutralizing solution, eosin, water and various strengths of alcohol. The solutions dissolve the paraffin, clean the section and stain the tissue.

f. Mount stained specimens.
The stained tissues (on slides) are covered with permount, and a cover slip is placed on top. They are also labeled with their pathology number and checked under a microscope.

g. Prepare frozen sections.
Frozen sections are done when a surgeon wants an immediate diagnosis on a tissue while the patient is still in the operating room. This is generally performed to ascertain if a tissue is cancerous (thus necessitating more radical surgery). The tissue is cut on a cryostat, which freezes the tissue so it can be cut (instead of paraffin). A rapid stain is performed.

h. Assist in bone marrow examination.
Sponges, slides, coverslips and other materials are brought to the patient's room. The bone marrow is aspirated in a syringe and a smear is made. The clot of marrow which is left is brought to the histology department, given a pathology number and processed as a tissue. The smears are stained by a special stain.

i. Assist pathologist at autopsy.
Duties include weighing organs, taking measurements and recording them. This also involves general cleaning duties.

j. Decalcify specimens of bone and teeth.

Bones are too hard to process and cut without first softening them. The bone is decalcified by placing it in a special solution overnight which removes the calcium from the bone.

VIII. Urinalysis and Parasitology

a. Examine urine specimens macroscopically and microscopically.

This is one of the most important of all diagnostic procedures, not only for diseases of the kidney but also for many extrarenal conditions. The macroscopic exams are done by reporting color and appearance as well as some tests listed below. A microscopic examination is made on the sediment resulting from centrifuging the sample.

b. Urine acidity (pH).

See Chemistry, #2.

c. Urine specific gravity.

See Chemistry, #5.

d. Occult blood.

See Chemistry, #14.

e. Albumin.

See Chemistry, #6.

f. Hemoglobin.

A test performed to distinguish hemoglobinuria and hematuria in urine. Equal amounts of urine and a reagent are placed in a test tube. A blue color appears if hemoglobin is present.

g. Glucose.

See Chemistry, #20b.

h. Bile.

This test is important since bile may appear in urine before it causes jaundice or icterus in the tissues.

A reagent tablet is placed on a special mat. A drop of urine is allowed to flow over the tablet and onto the mat. If bile is present, a color change will occur.

i. B.U.N. (Urea Nitrogen).

This organic solid constitutes about half of all solids found in urine. The urine is diluted 1 to 100 and placed in a cup on the autoanalyzer. The reagents are run through the system and the specimen is drawn through and mixed with the reagents. The value is determined from a standard curve.

j. Calcium.

See Chemistry, #10a.

k. Bilirubin.

See Chemistry, #29.

l. Porphyrins.

Porphyrins are a form of hemoglobin which causes a reddish color in urine. The porphyrins are separated from the rest of the urine by adding glacial acetic acid-ether mixtures and are extracted by adding hydrochloric acid. They give a red fluorescence in ultraviolet light.

m. Ketones.

Ketones are associated with the amount of available glycogen in the liver. The test may aid in the diagnosis of diabetes mellitus. A test strip is immersed in a sample of urine. The result of the test depends on the color which develops.

n. Bence-Jones protein.

This is a test for the diagnosis of multiple myeloma. Nitric acid is added to a fresh, filtered urine sample. If a ring forms, the same test is performed with hydrochloric acid. If a ring forms again, a portion of the original specimen is acidified to pH 5 and allowed to stand for 5 minutes and is then filtered if a precipitate forms. The filtrate is warmed to 70^{o} centigrade for 15 minutes and if a coagulum forms, it is boiled for 10 minutes. If the coagulum dissolves, protein is present.

o. Phenolsulfonphthalein (PSP) excretion test.

This is a kidney excretion test.

The patient is given an intravenous injection by the doctor of phenolsulfonphthalein and is required to drink 300 to 400 ml. of water. Thirty minutes later the dye is administered. The patient voids after 15 minutes, one hour and two hours. A portion of the urine is diluted with water, and a reagent is added. The resulting color is compared with known standards.

p. Identify parasitic and disease-carrying arthropods.

Arthropods may cause human disease, transmit pathogenic microorganisms or serve as host for part of the life cycle of certain animal parasites. The arthropods include: scorpions, spiders, ticks, mites, lice, bedbugs, mosquitoes and flies. This examination is performed macroscopically.

q. Identify protozoans, cestodes, nematodes, trematodes.

Certain protozoa are capable of living in the intestinal tract, while others may be found in the blood and tissue. They may be identified through blood smears (such as malarial smears) or from stool specimens. This examination is performed microscopically and may or may not be stained.

Cestodes, or tapeworms, are common parasites. They may be passed by stool or regurgitation and are identified macroscopically.

The nematodes' features are cylindrical shape, non-segmented bodies, tapered ends and a cuticular covering. They are found in stool specimens and are identified microscopically, usually on unstained specimens.

The trematodes are dorsoventrally flattened, non-segmented worms which have a leaf-like appearance. The diagnosis depends on finding the ova in the stool specimen. They are identified microscopically, on both stained and unstained specimens.

r. Scotch tape test.

The Scotch tape test is for identification of Enterobius vermicularis, or pin worm. The eggs are usually found at the perineal folds site.

A commercial blade is now available, which is the thickness of a slide. The blade is transparent, and one side contains a sticky material. This side of the blade is touched to the perineal folds, usually before patient arises in the morning. This specimen is received in the laboratory and read microscopically under low power.

s. Stain parasitological smears.

Staining of parasitological smears is done to facilitate identification. The protozoans are usually stained in iron-hematoxylin. The genus called Plasmodium, malarial parasites, is stained with Wright's stain. The cestodes, nematodes and trematodes are usually observed in wet stool specimens, not stained, or stained only with iodine.

t. Fat, fatty acids only (microscopic).

This procedure is requested in cases of suspected impaired absorption in the intestines or pancreatic insufficiency. These acids, which appear in the feces, are stained with Sudan III. Stained, they appear as light orange flakes or colorless needle-like crystals.

u. Fat, neutral fat only (microscopic).

Purpose is same as "t." Neutral fat appears as bright orange flakes.

v. Fat and meat fibers (microscopic).

Purpose is same as "t." The method for fat is the same as either "t" or "u." The meat fibers are recognized in a wet stool smear.

w. Concentration technique.

This test is done to evaluate the capacity of the kidney to concentrate urine.

The patient is fasted 16 hours, usually starting at 5:00 p.m. Urine is collected at 7, 8 and 10 a.m., the following morning. The specific gravity under normal conditions should be 1.025. Failure to concentrate urine above 1.020 is indicative of renal functional impairment.

ELECTROCARDIOGRAPH (EKG) TECHNICIAN

1. Cleaning and putting away equipment and supplies.

   Performer soaks the limb leads and the chest suction cup in hot water and soap, scrubs them to remove excess or caked on paste, removes them, dries them with a paper towel and returns them to the EKG machine. The patient cable leads are wiped off with warm water, and the machine is washed down with warm water and soap. If there is a chance of contamination, however (i.e.,if an EKG has been done on a precaution patient with a communicable disease), the machine is washed twice with Phisohex or alcohol. When new equipment or supplies arrive, the order is checked for completeness. The order slip is signed and taken to Accounts Payable, and the supplies are placed in the cabinet in their proper storage position.

2. Checking equipment, restocking supplies on EKG machines.

   The performer routinely checks the heat of the stylus, or writing arm, the heart curve standardization and the machine's general operation. The EKG machine is restocked as necessary with paper, paste and wipes.

3. Making minor adjustments and repairs to machines or notifying repair company.

   The performer may regulate heat, change the stylus or change the fuse that controls the heat regulation. For any other repairs, the performer calls an outside manufacturer.

4. Checking and sorting requisitions in the morning prior to going to floors.

   Requisitions are checked for completeness and for the patient's stamp, sorted according to patient floors and put into a drawer on the machine.

5. a. Examining patient's chart, indicating completed EKG.

   The performer may check to see if another EKG has been done by someone-else and if the patient is receiving heart stimulation drugs (Digitalis, Digitoxin, Quinidine). When an EKG is done, the performer marks "EKG completed" and the date on the bottom of the patient's Clinical Sheet.

   b. Using addressograph to stamp patient's charge slip.

   The charge slip is stamped with the patient's addressograph plate.

6. a. Bringing EKG machine to patient's bedside

   The EKG machine is rolled to the patient's bedside and plugged into the outlet. Patient is made comfortable, lying as flat as possible. The bedcovers are pulled loose and folded up to the patient's knees, and the performer explains what will occur.

   b. Attaching electrodes to legs and arms

   Paste is put onto the electrodes, and they are strapped with a rubber strap to the patient's arms (between wrist and elbow) and legs (between ankle and knee). If it is impossible to use the rubber strap to attach the electrodes (as with burned patients or amputees), tape or nothing may be used. One specific lead is attached to each electrode, the leads being marked to indicate the limb to which they should be attached.

c. Attaching and moving chest cup to successive positions.

The chest cup is attached by suction to the patient's chest and is moved successively across the chest to six predetermined standard positions.

7. Doing a rhythm strip at the verbal request of a physician.

A rhythm strip is a lead (attached to left leg and right arm), which shows any irregularities in heart rhythm (skipping beats, extra beats). The EKG machine and the electrodes are set up in the same manner as for a regular EKG.

8. Operating the EKG machine.

Twelve leads, six of which are chest leads, are taken and marked, measuring the electrical activity of the heart at various distances from the heart. Impulses generated within the heart are depicted in the form of waves which have characteristic patterns and correspond in frequency to specific events in the cardiac cycle.

9. Assisting physician or cardiologist by reporting unusual abnormalities immediately.

The results of the EKG are checked immediately, but superficially. If the performer notes any gross abnormalities, particularly in the case of a pre-operative patient, she notifies the resident.

10. Performing step test:

a. Taking complete EKG first

The complete EKG, which is taken first, is read by a physician and must be normal.

b. Instructing patient to walk up and down steps

Next, the patient is instructed to walk up, over and down three steps; the number of times he does this is determined by his age and weight. The average number of times up, over and down the steps is approximately twenty for a single test, or doubled for a double test.

c. Taking five or six chest and limb leads, according to physician's request, after three minutes and after five minutes.

The performer then takes and marks a series of leads, as determined by the physician, after three minutes and after five minutes, measuring the electrical activity of the heart upon exertion.

NEIGHBORHOOD HEALTH WORKER

1. a. Straightening up, cleaning the clinic area

   The performer generally wet wipes counter tops, desk tops and large pieces of equipment in the treatment or examination room and discards used disposable materials.

   b. Cleaning used equipment and instruments

   Other used equipment and supplies are washed with soap and water or with Phisohex and water (if there is a chance of contamination), rinsed, dried and put in their proper storage position, usually in one of two large storage closets. The clinic area must be set up appropriately for each clinic with supplies that the doctor will need and then broken down at the end of the clinic.

   c. Putting away supplies and equipment.

   The performer also checks on supplies and may order additional supplies, as necessary, by filling out a Clinic Requisition.

2. Booking appointments.

   The performer writes a memo for the clinic patient and records the appointment in the Appointment Book. Appointments may be made in person (at the clinic) or over the telephone. The performer may determine the need for, schedule and book the first clinic appointment; return appointments are usually scheduled by the examining physician. The performer may also send out reminders for appointments and may schedule a new appointment.

3. Answering the telephone, taking messages, notifying appropriate personnel.

   The performer answers the telephone and, depending on the nature of the information to be relayed, either records the message, gives out information or relays the call to another individual. For example, if the call concerns an illness where a decision about proper care or treatment is needed, a nurse or doctor will be notified.

4. Receiving, welcoming, and processing patients and directing them to appropriate medical personnel in health center.

   When a patient arrives, the performer greets him politely, checks to make sure he has a clinic appointment, indicates on the Clinic Appointment sheet that the patient has arrived and instructs the patient to sit in the waiting room until he is called.

5. Maintaining current records.

   The performer assembles records, making sure all necessary forms are present. On the patient's first clinic appointment, the performer may complete the family history and obtain the required socio-economic data (such as household roster, age and sex of children, agencies currently serving family and so on). She will also transfer information from old records brought by the patient to the clinic forms (i.e., immunizations previously received, vision and hearing test results). She pulls and keeps in order files of patients to be seen at each clinic, checks to make sure that each record is complete before returning it to the file and adds new forms if necessary. Immunization cards are filled out and sent to the Public Health Nursing Office at Cambridge Hospital; and the Daily Activity Report, the Daily Patient Tally and the Well-Child Conference Tally are checked and kept up-to-date. The performer also makes sure that Consent Forms are signed by patients for immunizations and for various procedures and treatments. School records and Head Start records must also be kept up-to-date, noting any illnesses diagnosed and treated and any immunizations and tests given.

6. Accompanying child or adult to Cambridge Hospital.

   The performer may accompany children back and forth from the Head Start center, the school and the clinic area. The performer may accompany patients to other agencies if they are nervous about going alone (e.g., to the Legal Aid Society) or accompany patients by taxi or police car to Cambridge Hospital.

7. Measuring and recording the following:

   a. Height and weight

      The performer measures the patient's weight on a balance-arm scale or, with babies, in a special weighing device and records the results. Height is measured with the height-scale attachment on the weight scale or with a tape measure attached to the wall.

   b. Temperature, pulse, respiration

      Refer to the Nursing Appendix, Function #24, a-c.

   c. Blood pressure.

      Refer to the Nursing Appendix, Function #24d.

8. Performing the following tests:

   a. Tine test

      The performer obtains a disposable Tine test kit and opens it. She cleans the patient's forearm with soap and water and then presses a four-pronged needle, which has been impregnated with test material, lightly into the skin on the patient's forearm. Approximately twenty-four hours later, the performer reads the results by feeling the site for swelling and observing it for redness. If there is any swelling, the performer measures it with a special ruler. If there is a question of the test being positive, the performer confirms her evaluation with a physician or nurse.

   b. Eye test

      The Snellen Eye Chart is used to perform the eye test. The patient is instructed to stand at a certain distance from the chart (20 feet), which is taped to the wall, and to cover one eye. With the uncovered eye the patient then reads lines of different-sized letters; the performer determines vision acuity by noting the last line which the patient could accurately read. The procedure is repeated with the other eye.

   c. Ear test

      The ear test is performed with the Naico Individual Pure Tone. The patient is instructed to put on earphones (one ear at a time) and to signal the performer when he hears a tone. The performer then moves knobs on the machine, to produce tones of different frequencies. She marks the results, based on whether the patient indicated that he heard the tone, and notes on the record whether the hearing was normal or abnormal.

d. Urine test

The performer asks the patient to void in a paper cup. She takes the cup to what serves as a utility room and obtains a Clinic Lab stick made of reactive paper. She puts the lab stick into the urine and then compares the stick to a colorimeter chart; if the color on the lab stick changes, this is noted as a positive reaction.

e. Hematocrit.

The performer obtains a lancet and a capillary tube from the storage closet. She washes the patient's finger with soap and water, punctures the fingertip with the lancet and places the end of the capillary tube directly on the site of the puncture. When the blood has risen into the capillary tube, she removes it, seals it immediately, labels the specimen appropriately, and stores it in the refrigerator until it can be taken to the Cambridge Hospital lab for evaluation.

9. Participating in weekly conferences with other health workers in the health center.

In the weekly staff meeting, the performer is expected to contribute her ideas in the development of policies, in the evaluation and correction of any Health Center problems and in the determination of the appropriate direction of the program's development. She should also interpret the community's point of view to other health workers in the center.

10. Making rounds in Headstart program:

    This function may be described as a combination of case-finding, health appraisal and first aid application.

    a. Take care of minor illnesses

       The performer checks the school children and Headstart children daily, locates any health problem and cares for minor health problems such as scratches, bruises, minor fevers, colds, small cuts and so on.

    b. Report more serious illnesses to public health nurses or supervisors

       She decides if the illness is serious enough to warrant the attention of a public health nurse or a physician in the Health Center: if so, she either takes the child to the Health Center or telephones the Health Center to arrange for the appropriate individual to come to the school.

    c. Make referrals to Cambridge Hospital.

       If the child needs immediate, major medical treatment (e.g., a large cut that requires stitches), she may take or send the child to Cambridge Hospital. She maintains records of any medical care given to school of Headstart children.

11. Assisting nurse or physician in treatment or examination of patient.

    The performer obtains necessary supplies, equipment and instruments and brings them to the nurse or physician. She may also hold or position a patient, hold equipment (e.g., flashlight) and comfort and reassure the patient. She may receive specimens from the examiner (e.g., throat culture) and label them appropriately.

12. Making home visits relating to health problems in Headstart children.

The performer may visit a home to confirm or to arrange an appointment, to deliver or pick up a specimen container, to find out why someone missed an appointment or to find out why a family has discontinued clinic care. She is responsible for interpreting the clinic's services and purpose to the neighborhood, for informally recruiting clients and for encouraging neighborhood residents to utilize the clinic.

APPENDIX D

PHASE II TABLES

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1]

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Function is Not Applic.
1. Straightening up and cleaning the following:												
a. Patient's immediate furniture	91.4	2.8	5.6	100.0	----	----	96.3	3.7	-----	100.0	-----	-----
b. Nurses station	80.0	20.0	----	88.9	11.1	----	37.0	63.0	-----	75.0	25.0	-----
c. Utility rooms	80.0	11.4	8.6	77.8	22.2	----	92.6	3.7	3.7	100.0	-----	-----
d. Treatment rooms	71.4	11.4	17.1	77.8	22.2	----	85.2	14.8	-----	87.5	12.5	-----
e. Nourishment center	40.0	28.6	31.4	55.6	22.2	22.2	77.8	14.8	7.4	75.0	12.5	12.5
f. Litters.	45.7	31.4	22.9	44.4	33.3	22.2	40.7	51.9	7.4	75.0	25.0	-----
2. Distributing mail and flowers.	14.3	34.3	51.4	33.3	44.4	22.2	70.4	11.1	18.5	12.5	37.5	50.0
3. Doing departmental errands:												
a. Going to pick up orthopedic equipment	17.1	54.3	28.6	33.3	66.7	----	40.7	40.7	18.5	75.0	12.5	12.5
b. Going to Central Supply or laundry	45.7	51.4	2.9	55.6	44.4	----	77.8	14.8	7.4	100.0	-----	-----
c. Going to IBM or records office	22.9	65.7	11.4	44.4	55.6	----	85.2	14.8	-----	75.0	12.5	12.5
d. Going to the operating room to help bring back a patient.	28.6	57.1	14.3	22.2	44.4	33.3	63.0	33.3	3.7	75.0	12.5	12.5
4. Doing errands for patients:												
a. Making phone calls	48.6	20.0	31.4	77.8	11.1	11.1	55.6	37.0	7.4	12.5	87.5	------
b. Refilling water jugs	48.6	14.3	37.1	55.6	11.1	33.3	85.2	3.7	11.1	87.5	-----	12.5
c. Preparing snacks or drinks from nourishment station	62.9	14.3	22.9	66.7	22.2	11.1	92.6	----	7.4	87.5	-----	12.5

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[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1] (Continued)

FUNCTIONS	R. N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Function is Not Applic.
d. Getting an extra pillow.	62.9	5.7	31.4	66.7	11.1	22.2	88.9	----	11.1	87.5	----	12.5
5. a. Giving and removing bedpans	91.4	----	8.6	100.0	----	----	100.0	----	----	100.0	----	----
b. Assisting patient to use bedpan or urinal	91.4	----	8.6	100.0	----	----	100.0	----	----	100.0	----	----
c. Helping patient to and from bathroom.	71.4	----	28.6	100.0	----	----	100.0	----	----	100.0	----	----
6. Making beds:												
a. Unoccupied	65.7	5.7	28.6	88.9	----	11.1	92.6	----	7.4	87.5	----	12.5
b. Occupied	71.4	5.7	22.9	88.9	----	11.1	96.3	----	3.7	87.5	----	12.5
c. Post-operative.	62.9	5.7	31.4	33.3	----	66.7	77.8	----	22.2	12.5	----	87.5
7. Answering patient calls.	85.7	----	14.3	66.7	11.1	22.2	85.2	----	14.8	100.0	----	----
8. Admitting patient:												
a. Completing clothes list or valuable list	48.6	17.1	34.3	88.9	11.1	----	92.6	----	7.4	87.5	----	12.5
b. Getting patient comfortably settled in bed	68.6	8.6	22.9	88.9	11.1	----	100.0	----	----	100.0	----	----
c. Notifying intern.	65.7	5.7	28.6	88.9	11.1	----	22.2	77.8	----	37.5	62.5	----
9. Discharging patient:												
a. Returning clothes and valuables	31.4	17.1	51.4	88.9	11.1	----	74.1	----	25.9	37.5	----	62.5

May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function 1 (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.
b. Accompanying patient from floor.	20.0	28.6	51.4	66.7	33.3	----	77.8	7.4	14.8	50.0	----	50.0
10. Locating and setting up simple equipment:												
a. Bed rails	5.7	----	94.3	77.8	22.2	----	96.3	----	3.7	87.5	----	12.5
b. Footboards	62.9	2.9	34.3	77.8	22.2	----	74.1	----	25.9	87.5	----	12.5
c. Sandbags	57.1	2.9	40.0	88.9	11.1	----	63.0	3.7	33.3	75.0	----	25.0
d. Heel coverlets.	60.0	2.9	37.1	77.8	22.2	----	74.1	----	25.9	75.0	----	25.0
11. Taking patient												
a. to X-Ray: Walking with him, by wheelchair, by litter.	42.9	48.6	8.6	77.8	22.2	----	92.6	7.4	----	100.0	----	----
b. Taking lab Specimen to lab.	60.0	37.1	2.9	77.8	22.2	----	92.6	7.4	----	100.0	----	----
12. Assisting in moving patient to another floor.	68.6	17.1	14.3	88.9	----	11.1	81.4	3.7	14.8	100.0	----	----
13. Measuring food and fluid intake and output and totaling:												
a. Urine jugs	82.9	----	17.1	100.0	----	----	88.9	3.7	7.4	87.5	----	12.5
b. Tube drainage	80.0	----	20.0	88.9	11.1	----	81.4	7.4	11.1	87.5	----	12.5
c. IV intake	85.7	----	14.3	100.0	----	----	81.4	11.1	7.4	62.5	25.0	12.5
at the end of each shift.												

May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.
14. a. Checking food trays	60.0	----	40.0	77.8	----	22.2	88.9	----	11.1	37.5	----	62.5
b. Delivering food trays	60.0	----	40.0	77.8	----	22.2	88.9	----	11.1	50.0	----	50.0
c. Picking up food trays	60.0	----	40.0	77.8	----	22.2	88.9	----	11.1	50.0	----	50.0
d. Feeding patients.	57.1	----	42.9	77.8	----	22.2	85.2	----	14.8	50.0	----	50.0
15. Putting away the following:												
a. Supplies	82.9	14.3	2.9	88.9	11.1	----	77.8	22.2	----	100.0	----	----
b. Equipment	82.9	14.3	2.9	88.9	11.1	----	77.8	22.2	----	100.0	----	----
c. Instruments.	85.7	11.4	2.9	88.9	11.1	----	70.4	29.6	----	100.0	----	----
16. a. Washing or soaking used equipment and supplies	88.6	8.6	2.9	88.9	11.1	----	92.6	7.4	----	87.5	----	12.5
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	54.3	34.3	11.4	100.0	----	----	88.9	11.1	----	100.0	----	----
17. Caring for deceased persons:												
a. Notifying appropriate persons	65.7	5.7	28.6	77.8	11.1	11.1	3.7	81.4	14.8	25.0	75.0	----
b. Washing and tying patient	57.1	8.6	34.3	88.9	----	11.1	70.4	----	29.6	100.0	----	----
c. Removing IV's, tubes dressings	62.9	2.9	34.3	88.9	----	11.1	66.7	3.7	29.6	87.5	12.5	----

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May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1]

	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
d. Going to morgue to get litter	34.3	31.4	34.3	66.7	22.2	11.1	70.4	----	29.6	100.0	----	----
e. Taking deceased person to morgue.	40.0	25.7	34.3	66.7	11.1	22.2	70.4	----	29.6	100.0	----	----
/8. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	100.0	----	----	100.0	----	----	96.3	3.7	----	100.0	----	----
/9. a. Collecting urine, stool, or sputum specimens to be sent to lab	91.4	2.9	5.7	100.0	----	----	100.0	----	----	100.0	----	----
b. Performing routine tests: Pre-meal glucose, Guiac, Albumen, Ph, Hematocrits.	74.3	14.3	11.4	100.0	----	----	88.9	----	11.1	100.0	----	----
c. Obtaining a culture.	60.0	8.6	31.4	88.9	11.1	----	18.5	77.8	3.7	37.5	62.5	----

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. May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function[1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.
20. Giving routine morning care:												
a. Assisting patient in bathing and dressing, brushing teeth	54.3	----	45.7	100.0	----	----	81.4	----	18.5	25.0	----	75.0
b. Turning or positioning patient	80.0	----	20.0	100.0	----	----	92.6	----	7.4	75.0	----	25.0
c. Giving massages or alcohol rubs	65.7	5.7	28.6	100.0	----	----	85.2	----	14.8	75.0	----	25.0
d. Walking with patients	60.0	----	40.0	100.0	----	----	92.6	----	7.4	75.0	----	25.0
e. Getting patients in and out of bed	60.0	----	40.0	100.0	----	----	92.6	----	7.4	75.0	----	25.0
f. Assisting with range of motion or other exercises	42.9	2.9	54.3	66.7	----	33.3	55.6	11.1	33.3	50.0	----	50.0
g. Caring for bed sores with tincture of benzoine.	48.6	2.9	48.6	55.6	11.1	33.3	70.4	----	29.6	75.0	----	25.0
21. Preparing patients for bed at night:												
a. Changing or straightening linen	11.4	----	88.6	----	----	100.0	3.7	----	96.3	12.5	----	87.5
b. Turning or positioning patient	8.6	----	91.4	----	----	100.0	3.7	----	96.3	12.5	----	87.5
c. Assisting patient in washing and brushing teeth	11.4	----	88.6	----	----	100.0	3.7	----	96.3	12.5	----	87.5

May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function.	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.
d. Giving massages.	8.6	----	91.4	----	----	100.0	3.7	----	96.3	12.5	----	87.5
22. Assisting patients with the following:												
a. Walkers	40.0	5.7	54.3	66.7	11.1	22.2	70.4	3.7	25.9	87.5	12.5	----
b. Wheelchairs	65.7	----	34.3	77.8	----	22.2	92.6	----	7.4	100.0	----	----
c. Crutches	48.6	8.6	42.9	77.8	11.1	11.1	59.3	18.5	22.2	75.0	25.0	----
d. Braces	14.3	8.6	77.1	33.3	11.1	55.6	22.2	48.2	29.6	50.0	25.0	25.0
e. Artificial limbs.	11.4	8.6	80.0	22.2	11.1	66.7	25.9	44.4	29.6	37.5	25.0	37.5
23. Lifting patients on and off the litters.	100.0	----	----	100.0	----	----	92.6	3.7	3.7	100.0	----	----
24. Taking and recording:												
a. Temperature	100.0	----	----	100.0	----	----	100.0	----	----	87.5	12.5	----
b. Pulse	100.0	----	----	100.0	----	----	100.0	----	----	87.5	12.5	----
c. Respiration rate	100.0	----	----	100.0	----	----	100.0	----	----	87.5	12.5	----
d. Blood pressure	100.0	----	----	100.0	----	----	100.0	----	----	100.0	----	----
e. Weight.	88.6	2.9	8.6	100.0	----	----	92.6	----	7.4	25.0	----	75.0
25. Assisting patient with Sitz bath.	34.3	----	65.7	55.6	----	44.4	44.4.	7.4	48.2	37.5	12.5	50.0
26. Applying or changing:												
a. Ice bags	88.6	----	11.4	100.0	----	----	92.6	----	7.4	75.0	----	25.0
b. Hot water bottles	82.9	----	17.1	100.0	----	----	85.2	----	14.8	87.5	----	12.5
c. Ace bandages	82.9	----	17.1	100.0	----	----	74.1	11.1	14.8	75.0	25.0	----

[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function[1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.
d. Elastic stockings	85.7	----	14.3	77.8	11.1	11.1	88.9	----	11.1	100.0	----	----
e. Binders	71.4	----	28.6	66.7	11.1	22.2	85.2	3.7	11.1	37.5	62.5	----
f. Slings	62.9	----	37.1	88.9	----	11.1	66.7	14.8	18.5	75.0	25.0	----
g. Restraints.	88.6	----	11.4	100.0	----	----	81.4	3.7	14.8	100.0	----	----
27. Giving cleansing treatments:												
a. Enemas	74.3	----	25.7	88.9	----	11.1	88.9	7.4	3.7	87.5	----	12.5
b. Douches.	34.3	----	65.7	44.4	----	55.6	22.2	59.3	18.5	12.5	75.0	12.5
28. Caring for wounds:												
a. Dressing wounds	94.3	----	5.7	100.0	----	----	7.4	85.2	7.4	25.0	75.0	----
b. Irrigating wounds	94.3	----	5.7	100.0	----	----	18.5	74.1	7.4	25.0	75.0	----
c. Changing dressings.	94.3	----	5.7	100.0	----	----	48.2	48.2	3.7	50.0	50.0	----
29. Feeding patient by tube.	57.1	----	42.9	33.3	----	66.7	33.3	48.2	18.5	62.5	25.0	12.5
30. Caring for precaution or reverse precaution patients.	57.1	----	42.9	77.8	----	22.2	77.8	3.7	18.5	62.5	12.5	25.0
31. a. Setting up suture sets	54.3	8.6	37.1	66.7	----	33.3	55.6	37.0	7.4	50.0	----	50.0
b. Assisting doctor in removing sutures.	51.4	8.6	40.0	66.7	----	33.3	48.2	44.4	7.4	50.0	----	50.0

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[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Function[1]

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable
32. a. Doing cervical smears	42.9	2.9	54.3	22.2	22.2	55.6	40.7	48.2	11.1	----	50.0	50.0
b. Venereal disease smears.	17.1	11.4	71.4	----	44.4	55.6	14.8	63.0	22.2	12.5	37.5	50.0
33. Assisting doctor in dermatology problems:												
a. Wart removal	2.9	5.7	91.4	11.1	----	88.9	3.7	48.2	48.2	----	----	100.0
b. Skin biopsies.	5.7	5.7	88.6	22.2	----	77.8	3.7	48.2	48.2	----	----	100.0
34. Caring for lacerations:												
a. Wash laceration	14.3	----	85.7	22.2	----	77.8	3.7	14.8	81.4	37.5	12.5	50.0
b. Dress laceration.	14.3	----	85.7	22.2	----	77.8	3.7	14.8	81.4	37.5	12.5	50.0
35. Using EKG equipment:												
a. Bringing equipment to bedside	80.0	2.9	17.1	77.8	----	22.2	59.3	33.3	7.4	100.0	----	----
b. Setting up equipment	77.1	5.7	17.1	77.8	----	22.2	22.2	74.1	3.7	75.0	25.0	----
c. Attaching electrodes to patient	68.6	14.3	17.1	55.6	11.1	33.3	14.8	81.4	3.7	50.0	50.0	----
d. Operating EKG equipment.	28.6	51.4	20.0	33.3	55.6	11.1	----	100.0	----	----	100.0	----
36. Drawing blood.	40.0	60.0	----	22.2	77.8	----	----	100.0	----	----	100.0	----
37. a. Ordering drugs from pharmacy	82.9	17.1	----	100.0	----	----	----	100.0	----	----	100.0	----
b. Receiving drugs	77.1	17.1	5.7	100.0	----	----	----	100.0	----	----	100.0	----
c. Putting drugs away.	80.0	17.1	2.9	100.0	----	----	----	100.0	----	----	100.0	----

. May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
38. a. Administering specified medication	100.0	----	----	100.0	----	----	14.8	85.2	----	50.0	50.0	----
b. Noting time and amounts on patients' charts.	100.0	----	----	100.0	----	----	7.4	92.6	----	12.5	87.5	----
39. Performing functions related to oxygen masks, catheters:	100.0	----	----	88.9	----	11.1						
a. Bringing equipment to bedside (O)							59.0	30.0	11.0	62.0	38.0	----
(Cat)							63.0	33.0	4.0	87.5	12.5	----
b. Assembling (O)							38.5	50.0	11.5	62.0	38.0	----
(Cat)							34.7	61.0	4.3	62.0	38.0	----
c. Inserting or applying (O)							30.0	59.0	11.0	62.0	38.0	----
(Cat)							13.0	83.0	4.0	50.0	50.0	----
d. Adjusting or caring for equipment (O)							48.0	41.00	11.0	62.0	38.0	----
(Cat)							34.7	61.0	4.3	75.0	25.0	----
e. Removing. (O)							52.0	37.0	11.0	62.0	38.0	----
(Cat)							54.0	42.0	4.0	62.0	38.0	----
41. Performing functions relating to IV's: a. Bringing equipment to bedside	88.6	2.9	8.6	100.0	----	----	66.7	29.6	3.7	100.0	----	----

1. May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function[1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
b. Assembling	88.6	2.9	8.6	100.0	----	----	40.7	55.6	3.7	87.5	12.5	----
c. Inserting needle, starting IV, hanging bottles	20.0	68.6	11.4	----	100.0	----	----	96.3	3.7	----	100.0	----
d. Changing labeled bottles	91.4	----	8.6	100.0	----	----	66.7	29.6	3.7	75.0	25.0	----
e. Discountinuing IV service.	91.4	----	8.6	100.0	----	----	55.6	40.7	3.7	50.0	50.0	----
92. Assisting physicians during treatment and examination of patients:												
a. Bringing equipment to bedside	91.4	----	8.6	100.0	----	----	81.4	18.5	----	100.0	----	----
b. Preparing equipment or patient, assembling equipment	91.4	----	8.6	100.0	----	----	70.4	29.6	----	100.0	----	----
c. Holding or restraining patient as necessary	91.4	----	8.6	100.0	----	----	85.2	11.1	3.7	100.0	----	----
d. Removing and cleaning equipment afterwards.	91.4	----	8.6	100.0	----	----	88.9	11.1	----	100.0	----	----

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[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function[1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES'AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
83. Counting narcotics and barbiturates at the change of each shift.	85.7	11.4	2.9	100.0	----	----	----	100.0	----	12.5	87.5	----
84. Observing and reporting to supervisor or physician:												
a. Patient's condition	97.1	----	2.9	88.9	12.5	----	100.0	----	----	100.0	----	----
b. Patient's reaction to drugs, treatments, IV's	97.1	----	2.9	88.9	12.5	----	100.0	----	----	100.0	----	----
c. Significant incidents.	97.1	----	2.9	88.9	12.5	----	100.0	----	----	100.0	----	----
85. a. Serving emotional support to patients	100.0	----	----	100.0	----	----	96.3	3.7	----	100.0	----	----
b. Entertaining patients (particularly children).	20.0	----	80.0	33.3	----	66.7	11.1	3.7	85.2	25.0	----	75.0
86. Participating in cardiac arrest team:												
a. Bringing equipment to bedside	68.6	----	31.4	66.7	----	33.3	59.3	7.4	33.3	75.0	----	25.0
b. Call "444"	62.9	----	37.1	66.7	----	33.3	25.9	37.0	37.0	75.0	----	25.0

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[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
c. Start external cardiac massage	45.7	2.9	51.4	55.6	----	44.4	7.4	77.8	14.8	62.5	12.5	25.0
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	48.6	5.7	45.7	55.6	----	44.4	3.7	81.4	14.8	62.5	12.5	25.0
e. Remove, clean equipment, restock emergency cart afterwards.	68.6	----	31.4	66.7	----	33.3	11.1	74.1	14.8	25.0	75.0	----
VI. Beginning preparations for patient scheduled for surgery:												
a. Wash operative area	34.3	----	65.7	55.6	----	44.4	48.2	25.9	25.9	25.0	12.5	62.5
b. Shave operative area	11.4	----	88.6	22.2	11.1	66.7	11.1	51.9	37.0	12.5	----	87.5
c. Instruct patient not to eat or drink	51.4	----	48.6	77.8	----	22.2	66.7	7.4	25.9	62.5	----	37.5
d. Remove jewelry, bobby pins, dentures, or other prostheses	51.4	----	48.6	77.8	----	22.2	66.7	7.4	25.9	62.5	----	37.5
VII. Filling out accident reports.	28.6	----	71.4	44.4	----	55.6	----	81.4	18.5	37.5	62.5	----

[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
49. Filling out: a. Stamping lab slips and requisitions	94.3	5.7	----	100.0	----	----	55.6	44.4	----	62.5	37.5	----
b. Making necessary arrangements for X-rays, lab work.	82.9	11.4	5.7	88.9	11.1	----	22.2	77.8	----	37.5	62.5	----
50. Checking and posting orders in MD order books.	85.7	8.6	5.7	88.9	----	11.1	14.8	85.2	----	25.0	75.0	----
51. Checking off diet Manual each shift.	62.9	11.4	25.7	88.9	----	11.1	11.1	81.4	7.4	37.5	62.5	----
52. a. Recommending (or)	25.7	45.7	28.6	55.6	33.3	11.1	14.8	85.2	----	12.5	87.5	----
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	20.0	54.3	25.7	33.3	55.6	11.1	----	100.0	----	12.5	87.5	----
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	54.3	31.4	14.3	100.0	----	----	3.7	96.3	----	----	100.0	----

1. May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function[1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
4. Evaluating quality of nursing care.	51.4	42.9	5.7	77.8	22.2	----	11.1	88.9	----	12.5	87.5	----
5. Observing nursing care and visiting patients regularly to ensure proper nursing care.	88.6	11.4	----	77.8	22.2	----	11.1	88.9	----	----	100.0	----
6. Regularly inspecting rooms and wards for cleanliness and comfort.	77.1	22.9	----	100.0	----	----	18.5	81.4	----	----	100.0	----
7. Accompanying physicians on rounds.	62.9	8.6	28.6	100.0	----	----	3.7	88.9	7.4	----	100.0	----
8. Investigating and adjusting complaints.	74.3	22.9	2.9	100.0	----	----	11.1	88.9	----	----	100.0	----
9. Supervising preparation and maintenance of patients' clinical records.	82.9	17.1	----	88.9	11.1	----	11.1	88.9	----	----	100.0	----
10. Giving change-of-shift report.	68.6	14.3	17.1	100.0	----	----	18.5	81.4	----	25.0	75.0	----

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[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function [1] (Continued)

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct.is Not Applic.
61. Teaching.	77.1	8.6	14.3	66.7	16.7	16.7	70.4	29.6	----	37.5	50.0	12.5
62. Research.	----	----	100.0	----	----	100.0	----	96.3	3.7	----	----	100.0
63. Supervisory duties.	57.1	37.1	5.7	100.0	----	----	3.7	96.3	----	----	100.0	----
64. Waiting for work.	60.0	40.0	----	44.4	55.5	----	44.4	55.5	----	50.0	50.0	----
65. Caring for a mother in labor:				----	----	100.0	3.7	----	96.3	----	----	100.0
a. Admitting patient	8.6	----	91.4									
b. Obtaining necessary information from patient	8.6	----	91.4									
c. Checking vital signs and fetal heart frequently	8.6	----	91.4									
d. Prepping patient given enema	8.6	----	91.4									
e. Providing emotional support	8.6	----	91.4									
f. Other.	8.6	----	91.4									
66. Assisting in delivery room:				----	----	100.0	3.7	----	96.3	----	----	100.0

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1. May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides And Orderlies Performing Each Function[1]

FUNCTIONS	R.N.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
66. a. Assisting in transferring patient to delivery room, and positioning, securing, and draping patient as necessary on table	8.6	----	91.4
b. Setting-up delivery room	8.6	----	91.4
c. Directly assisting doctor as necessary	8.6	----	91.4
d. Receiving baby from doctor, place in heated crib	2.9	5.7	91.4
e. Giving suction and oxygen as necessary	8.6	----	91.4
f. Putting silver nitrate in eyes of baby	8.6	----	91.4
g. Clamping umbilical cord	5.7	2.9	91.4
h. Measuring baby, taking footprints	8.6	----	91.4
i. Cleaning up both patient and used equipment, instruments afterwards	8.6	----	91.4

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[1] May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Function[1]

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable
j. Other	8.6	----	91.4	----	----	----	----	----	----	----	----	----
67. Caring for newborn:	8.6	----	91.4	----	----	100.0	7.4	----	92.6	----	----	100.0
a. Moving baby from delivery room to nursery	8.6	----	91.4	----	----	----	----	----	----	----	----	----
b. Washing, diapering	----	----	100.0	----	----	----	----	----	----	----	----	----
c. Feeding	----	----	100.0	----	----	----	----	----	----	----	----	----
d. Teaching mother how to breast-feed, bottle-feed, bathe, and generally care for baby.	----	----	100.0	----	----	----	----	----	----	----	----	----
68. Caring for mother after delivery:	5.7	----	94.3	----	----	100.0	7.4	----	92.6	----	----	100.0
a. Encouraging mother to get up, take showers, force fluids, etc.	2.9	----	97.1	----	----	----	----	----	----	----	----	----
b. Checking perineum sutures, breasts, fundus, and flow of patient.	5.7	----	94.3	----	----	----	----	----	----	----	----	----

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1. May not add to 100 percent because of rounding

Table No. 1 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Function [1]

FUNCTIONS	R.N.			L.P.N.			NURSES' AIDE			ORDERLY		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable	% Performing Function	% Not Performing Function	% Where Funct. is Not Applicable
69. Preparing babies or children for afternoon naps, including:												
a. Bathe them	5.7	----	94.3	11.1	----	88.9	11.1	----	88.9	----	----	100.0
b. Change diapers	5.7	----	94.3	11.1	----	88.9	11.1	----	88.9	----	----	100.0
c. Giving them bottles, if applicable.	5.7	----	94.3	11.1	----	88.9	11.1	----	88.9	----	----	100.0

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1. May not add to 100 percent because of rounding

Table No. 2 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
1. Straightening up and cleaning: patients' immediate furniture, nurses station, utility rooms, treatment rooms, nourishment center and litters.	100.0	7.5	100.0	9.2	100.0	6.0	100.0	4.9
2. Distributing mail and flowers.	14.3	0.5	33.3	0.5	70.4	1.2	12.5	0.5
3. Doing departmental errands: going to orthopedic department, Central Supply, laundry, IBM or records office, or operating room to help bring back a patient.	60.0	1.1	55.6	0.5	96.3	1.6	100.0	1.4
4. Doing errands for patients: making phone calls, refilling water jugs, preparing snacks or drinks from nourishment station, getting an extra pillow.	80.0	2.5	100.0	2.9	96.3	5.9	100.0	5.2
5. Giving and removing bedpans, assisting patient to use bedpan or urinal, helping patient to and from bathroom.	91.4	5.2	100.0	7.1	100.0	7.0	100.0	6.1

Table No. 2 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

F U N C T I O N S	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
6 Making beds: unoccupied, occupied, post-operative. me given in No. 20).	77.1		88.9		100.0		100.0	
7 Answering patient calls.	85.7	1.4	66.7	0.5	85.2	0.8	100.0	2.4
8 Admitting patient: completing clothes list or aluables list, getting atient settled in bed, otifying intern.	77.1	1.9	88.9	1.6	100.0	2.9	100.0	2.4
9 Discharging patient: returning clothes and aluables, accompanying atient from floor.	37.1	0.7	88.9	1.0	85.2	3.0	50.0	1.8
10 Locating and setting up imple equipment: bed ails, footboards, sandbags, and coverlets.	74.3	1.3	100.0	1.1	96.3	0.9	87.5	1.2
11 Taking patient to X-ray; aking lab specimens to lab.	62.9	2.2	77.8	2.6	92.6	3.5	100.0	2.4
12 Assisting in moving atient to another floor.	68.6	2.2	88.9	1.1	81.4	0.8	100.0	2.1
13 Measuring food and fluid ntake and output and totaling: urine jugs, tube rainage and IV intake, at he end of each shift.	85.7	4.0	100.0	3.7	88.9	4.0	87.5	3.0

Table No. 2 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

F U N C T I O N S	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
4. Checking, delivering and picking up food trays; feeding patients.	60.0	9.5	77.8	11.6	88.9	12.0	50.0	11.1
5. Putting away supplies, instruments and equipment.	82.9	1.4	88.9	1.4	77.8	2.2	100.0	1.6
6. Washing or soaking used equipment and supplies, putting them on the cart to be returned to Cental Supply.	88.6	1.6	100.0	2.8	92.6	2.0	100.0	1.3
7. Caring for deceased persons.	71.4	0.7	88.9	1.1	70.4	0.5	100.0	1.8
8. Giving information or directions to patients or visitors, or directing them to the correct source of information.	100.0	2.2	100.0	1.5	96.3	0.8	100.0	0.5
9. Collecting urine, stool, or sputum specimens to be sent to lab; performing routine tests; obtaining a culture.	91.4	3.5	100.0	2.5	100.0	3.8	100.0	4.9
10. Giving routine morning care.	80.0	15.4	100.0	18.2	92.6	23.4	75.0	12.4
11. Preparing patients for bed at night.	11.4	8.5	---	----	3.7	35.0	12.5	3.0

Table No. 3 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those who Perform the Functions

FUNCTIONS	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
Assisting patients with alkers, wheelchairs, rutches and braces.	48.6	1.9	88.9	1.4	92.6	1.7	100.0	1.1
Lifting patients on and ff litters.	100.0	1.6	100.0	2.1	92.6	1.6	100.0	1.1
Taking and recording: emperature, pulse, respiration rate, blood ressure and weight.	100.0	6.0	100.0	3.8	100.0	10.8	100.0	5.5
Assisting patient with its bath.	34.3	0.5	55.6	0.5	44.4	1.1	37.5	0.5
Applying or changing: ce bags, hot water bottles, ce bandages, elastic tockings, binders, slings, estraints.	100.0	4.2	100.0	3.8	100.0	3.5	100.0	2.4
Giving cleansing treatments: enemas, douches.	74.3	1.4	88.9	2.5	88.9	1.8	87.5	1.9
Caring for wounds: [illegible], irrigating, hanging dressings.	94.3	6.0	100.0	5.2	69.2	0.9	50.0	1.1
Feeding patient by tube.	57.1	3.2	22.2	0.3	22.2	0.5	62.5	0.5
Caring for isolation or reverse isolation patients.	57.1	1.0	77.8	0.5	77.8	0.4	62.5	0.5
Setting up suture sets, assisting doctor in removing sutures.	54.3	1.9	66.7	0.9	59.3	0.8	50.0	3.0

Table No. 2 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
32. Doing cervical smears; venereal disease smears.	42.9	1.5	22.2	0.5	40.7	0.5	12.5	0.5
33. Assisting doctor in wart removal; skin biopsies.	5.7	0.5	22.2	0.5	3.7	0.5	---	---
34. Washing and dressing lacerations.	14.3	1.4	22.2	0.5	3.7	0.5	37.5	1.3
35. Using EKG equipment.	82.9	0.7	77.8	0.5	59.3	0.7	100.0	0.8
36. Drawing blood.	40.0	0.7	22.2	0.5	---	---	----	----
37. Ordering drugs from pharmacy; receiving and putting away drugs.	88.6	1.7	100.0	2.3	---	---	---	---
38. Administering specified medication; noting time and amounts on patients' charts.	100.0	9.6	100.0	13.4	14.8	0.5	50.0	0.5
39. Performing functions related to oxygen masks and catheters.	100.0	2.3	88.9	1.6	74.1	0.9	100.0	1.3
41. Performing functions relating to IV's.	91.4	4.1	100.0	4.8	81.4	1.9	100.0	4.6
42. Assisting physicians during treatment and examination of patients.	91.4	5.1	100.0	5.1	88.9	1.9	100.0	2.7
43. Counting narcotics and barbiturates at the change of each shift.	85.7	1.4	100.0	1.8	----	----	12.5	0.5

Table No. 2 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
44. Observing and reporting to supervisor or physician on patient's condition, reaction to drugs, treatments, IV's, significant incidents.	97.1	1.5	88.9	0.5	100.0	0.8	100.0	0.8
45. Serving emotional support to patients; entertaining patients (particularly children).	100.0	1.0	100.0	0.5	96.3	0.8	100.0	0.5
46. Participating in cardiac arrest team.	68.6	1.1	66.7	1.2	59.3	0.5	75.0	3.0
47. Beginning preparations for patient scheduled for surgery.	51.4	1.5	77.8	0.9	66.7	1.5	62.5	1.8
48. Filling out accident reports.	28.6	0.5	44.4	0.5	----	----	37.5	1.3
49. Stamping lab slips and requisitions; making necessary arrangements for X-rays and lab work.	94.3	3.2	100.0	2.3	55.6	1.0	62.5	1.5
50. Checking and posting orders in MD order books.	85.7	3.7	88.9	2.2	14.8	2.4	25.0	1.8
51. Checking off diet manual each shift.	62.9	1.7	88.9	0.8	11.1	0.5	37.5	1.3

Table No. 2 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
52. Recommending or arranging for a consultation with medical specialists, social service, psychiatry, etc.	34.3	0.5	55.6	0.5	14.8	0.5	12.5	0.5
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	54.3	0.8	100.0	0.8	3.7	0.5	---	---
54. Evaluating quality of nursing care.	51.4	0.7	77.8	0.5	11.1	0.5	12.5	0.5
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	88.6	2.7	77.8	0.5	11.1	1.3	---	---
56. Regularly inspecting rooms and wards for cleanliness and comfort.	77.1	1.6	100.0	0.5	18.5	2.0	---	---
57. Accompanying physicians on rounds.	62.9	2.7	100.0	0.5	3.7	0.5	---	---
58. Investigating and adjusting complaints.	74.3	0.8	100.0	0.5	11.1	0.5	---	---
59. Supervising preparation and maintenance of patients' clincial records.	82.9	1.2	88.9	0.8	11.1	1.3	----	----
60. Giving change-of-shift report.	68.6	4.5	100.0	2.2	18.5	1.0	25.0	1.8

Table No. 2 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		L. P. N.		Nurses' Aide		Orderly	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
61. Teaching.	77.1	3.4	66.7	0.5	70.4	1.2	37.5	0.5
62. Research.	---	---	---	---	---	---	---	---
63. Supervisory duties.	57.1	5.9	100.0	0.9	3.7	0.5	----	----
64. Waiting for work.	60.0	3.7	44.4	0.5	44.4	4.5	50.0	11.0
65. Caring for mother in labor.	8.6	6.3	---	---	3.7	8.0	---	---
66. Assisting in delivery room.	8.6	8.0	---	---	3.7	3.0	---	---
67. Caring for newborn.	8.6	1.3	---	---	7.4	5.5	---	---
68. Caring for mother after delivery.	5.7	8.0	---	---	7.4	4.5	---	---
69. Preparing babies or children for afternoon naps, including, bathing, diapering, giving bottle if applicable.	5.7	8.0	11.1	3.0	11.1	3.0	---	---

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	HOUSEKEEPING	WARD SECR.	VOLUNTEER	OTHER	H.N. OR DEPT. SUPERVISOR	OTHER APPR.
1. Straightening up and cleaning the following: a. Patient's immediate furniture	R.N.	65.7	65.7	62.9	20.0	5.7	5.7	----	----	2.9	---
	L.P.N.	62.5	75.0	62.5	12.5	12.5	12.5	----	----	----	---
	AIDE	33.3	33.3	91.6	25.0	62.5	----	----	----	----	---
	ORD.	42.8	42.8	71.4	85.7	14.2	----	----	----	----	---
b. Nurses' station	R.N.	75.0	75.0	50.0	13.8	5.5	8.3	----	----	8.3	---
	L.P.N.	62.5	25.0	62.5	12.5	12.5	12.5	----	----	----	---
	AIDE	41.6	41.6	54.1	8.3	41.6	33.3	----	----	----	---
	ORD.	50.0	50.0	83.3	83.3	16.6	----	----	----	----	---
c. Utility rooms	R.N.	65.7	65.7	60.0	14.2	5.7	2.8	----	----	----	---
	L.P.N.	62.5	75.0	12.5	12.5	12.5	12.5	----	----	----	---
	AIDE	25.0	25.0	87.5	16.6	58.3	----	----	----	----	---
	ORD.	42.8	42.8	71.4	85.7	14.2	----	----	----	----	---
d. Treatment rooms	R.N.	80.0	80.0	47.2	13.8	5.5	2.7	----	----	2.7	---
	L.P.N.	50.0	62.5	75.0	12.5	12.5	12.5	----	----	----	---
	AIDE	37.5	37.5	83.3	16.6	58.3	----	----	----	----	---
	ORD.	42.8	42.8	71.4	85.7	14.2	----	----	----	----	---
e. Nourishment center	R.N.	60.0	60.0	57.1	14.2	5.7	2.8	----	----	----	---
	L.P.N.	44.4	55.5	66.6	11.1	22.2	11.1	----	----	----	---
	AIDE	25.0	25.0	91.6	20.8	66.6	----	----	----	----	---
	ORD.	42.8	42.8	71.4	85.7	14.2	----	----	----	----	---
f. Litters.	R.N.	63.8	63.8	55.5	13.8	2.7	2.7	----	----	----	---
	L.P.N.	50.0	62.5	75.0	12.5	12.5	12.5	----	----	----	---
	AIDE	13.6	13.6	81.8	13.6	63.6	----	----	----	----	---
	ORD.	42.8	42.8	71.4	85.7	14.2	----	----	----	----	---
2. Distributing mail and flowers.	R.N.	17.6	17.6	35.2	11.7	----	35.2	23.5	----	5.8	---
	L.P.N.	16.6	16.6	16.6	16.6	----	16.6	50.0	----	----	---
	AIDE	26.3	26.3	68.4	26.3	----	47.3	31.5	----	----	---
	ORD.	----	----	66.6	33.3	----	----	33.3	----	----	---
3. Doing departmental errands: a. Going to pick up orthopedic equipment	R.N.	10.7	10.7	53.5	21.4	10.7	17.8	----	7.1	10.7	7
	L.P.N.	16.6	16.6	66.6	50.0	16.6	----	----	----	----	---
	AIDE	----	----	72.7	13.6	----	18.1	9.0	4.5	----	9
	ORD.	----	----	40.0	100.0	----	----	----	----	----	---

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	HOUSEKEEPING	WARD SECR.	VOLUNTEER	OTHER	H.N. OR DEPT. SUPERVISOR	OTHER APPR. DEPARTMENTS
b. Going to Central Supply or laundry	R.N.	19.3	19.3	54.8	19.3	9.6	19.3	----	9.6	6.4	6.4
	L.P.N.	16.6	16.6	66.6	50.0	16.6	----	----	----	----	----
	AIDE	----	----	81.8	13.6	9.0	18.1	9.0	9.0	----	----
	ORD.	----	----	28.5	100.0	----	----	----	----	----	----
c. Going to IBM or records office	R.N.	10.0	10.0	56.6	20.0	6.6	26.6	----	6.6	6.6	6.6
	L.P.N.	16.6	16.6	66.6	50.0	16.6	----	----	----	----	----
	AIDE	----	----	80.9	14.2	----	23.8	----	4.7	----	----
	ORD.	----	----	16.6	83.3	----	----	16.6	----	----	----
d. Going to the operating room to help bring back a patient.	R.N.	17.2	13.7	55.1	24.1	3.4	20.6	----	6.8	6.8	6.8
	L.P.N.	14.2	14.2	57.1	57.1	14.2	----	----	----	----	----
	AIDE	4.7	4.7	85.7	33.3	----	9.5	----	4.7	----	----
	ORD.	----	----	40.0	80.0	----	----	----	----	----	20.0
. Doing errands for patients: a. Making phone calls	R.N.	45.8	45.8	58.3	12.5	----	----	----	8.3	----	
	L.P.N.	57.1	57.1	85.7	57.1	----	14.2	----	----	----	----
	AIDE	33.3	33.3	61.9	9.5	----	19.0	----	----	----	----
	ORD.	28.5	28.5	71.4	86.7	----	----	----	----	----	----
b. Refilling water jugs	R.N.	45.8	45.8	58.3	12.5	----	----	----	8.3	----	----
	L.P.N.	37.5	62.5	62.5	37.5	----	12.5	12.5	----	----	----
	AIDE	13.6	13.6	95.4	13.6	----	----	4.5	----	----	----
	ORD.	28.5	28.5	71.4	85.7	----	----	----	----	----	----
c. Preparing snacks or drinks from nourishment station	R.N.	50.0	50.0	58.3	12.5	----	----	----	8.3	----	----
	L.P.N.	42.8	57.1	71.4	42.8	----	14.2	14.2	----	----	----
	AIDE	17.3	17.3	95.6	13.0	----	----	4.3	----	----	4.3
	ORD.	28.5	28.5	71.4	85.7	----	----	----	----	----	----
d. Getting an extra pillow.	R.N.	54.1	54.1	58.3	16.6	----	----	----	8.3	----	----
	L.P.N.	37.5	75.0	62.5	25.0	----	12.5	----	----	----	----
	AIDE	31.8	31.8	100.0	27.2	----	----	----	----	----	----
	ORD.	28.5	28.5	71.4	85.7	----	----	----	----	----	----
. a. Giving and removing bedpans	R.N.	86.6	86.6	70.0	30.0	----	----	----	----	----	----
	L.P.N.	88.8	88.8	44.4	----	----	----	----	----	----	----
	AIDE	56.0	56.0	100.0	16.0	----	----	----	----	----	----
	ORD.	62.5	62.5	62.5	100.0	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECR.	VOLUNTEER	OTHER	H.N. OR DEPT. SUPERVISOR	ANOTHER
b. Assisting patient to use bedpan or urinal	R.N.	86.6	86.6	70.0	30.0	----	----	----	----	----	---
	L.P.N.	88.8	88.8	44.4	----	----	----	----	----	----	---
	AIDE	56.0	56.0	100.0	16.0	----	----	----	----	----	---
	ORD.	62.5	62.5	62.5	100.0	----	----	----	----	----	---
c. Helping patient to and from bathroom.	R.N.	86.2	86.2	72.4	31.0	----	----	----	----	----	---
	L.P.N.	88.8	88.8	44.4	----	----	----	----	----	----	---
	AIDE	56.0	56.0	100.0	16.0	----	----	----	----	----	---
	ORD.	62.5	62.5	62.5	100.0	----	----	----	----	----	---
6. Making beds a. Unoccupied	R.N.	81.4	81.4	70.3	33.3	----	----	----	3.7	----	---
	L.P.N.	85.7	85.7	100.0	28.5	----	----	----	----	----	---
	AIDE	52.0	52.0	100.0	16.0	----	----	----	----	----	---
	ORD.	33.3	33.3	83.3	100.0	----	----	----	16.6	----	---
b. Occupied	R.N.	85.1	85.1	62.9	33.3	----	----	----	3.7	----	---
	L.P.N.	85.7	85.7	100.0	28.5	----	----	----	----	----	---
	AIDE	52.0	52.0	100.0	16.0	----	----	----	----	----	---
	ORD.	57.1	57.1	71.4	85.7	----	----	----	14.2	----	---
c. Post-operative.	R.N.	84.6	84.6	65.3	34.6	----	----	----	3.8	----	---
	L.P.N.	85.7	85.7	100.0	28.5	----	----	----	----	----	---
	AIDE	54.1	54.1	100.0	16.6	----	----	----	----	----	---
	ORD.	33.3	33.3	83.3	100.0	----	----	----	16.6	----	---
7. Answering patient calls.	R.N.	78.2	78.2	65.2	39.1	----	8.6	----	4.3	4.3	---
	L.P.N.	50.0	50.0	75.0	25.0	----	25.0	----	----	----	---
	AIDE	63.1	63.1	89.4	26.3	----	31.5	----	----	----	---
	ORD.	71.4	71.4	71.4	100.0	----	----	----	----	----	---
8. Admitting patient: a. Completing clothes list or valuables list	R.N.	58.8	58.8	61.7	23.5	----	8.8	----	2.9	2.9	---
	L.P.N.	62.5	62.5	87.5	25.0	----	----	----	----	----	---
	AIDE	30.7	30.7	92.3	3.8	----	----	----	----	----	---
	ORD.	25.0	12.5	37.5	100.0	----	----	----	----	----	---
b. Getting patient comfortably settled in bed	R.N.	61.7	64.7	61.7	23.5	----	5.8	----	2.9	2.9	---
	L.P.N.	62.5	62.5	87.5	25.0	----	----	----	----	----	---
	AIDE	30.7	30.7	92.3	3.8	----	----	----	----	----	---
	ORD.	25.0	12.5	37.5	100.0	----	----	----	----	----	---
c. Notifying intern.	R.N.	70.5	70.5	41.1	8.8	----	5.8	----	2.9	5.8	---
	L.P.N.	62.5	62.5	87.5	25.0	----	----	----	----	----	---
	AIDE	61.5	61.5	46.1	3.8	----	----	----	----	7.6	---
	ORD.	37.5	25.0	37.5	87.5	----	----	----	----	----	---

able No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	HOUSE KEEPING	M.D.	WARD SECR.	OTHER	ANOTHER APPROPRIATE DEPARTMENT	X-RAY TECH.
. Discharging patient: a. Returning clothes and valuables	R.N.	56.5	56.5	56.5	13.0	----	4.3	13.0	4.3	----	----
	L.P.N.	55.5	55.5	66.6	22.2	----	----	33.3	----	---	----
	AIDE	18.1	18.1	90.9	9.0	----	----	13.6	----	----	----
	ORD.	25.0	25.0	50.0	75.0	----	----	----	----	25.0	----
b. Accompanying patient from floor.	R.N.	50.0	50.0	58.3	12.5	----	4.1	12.5	4.1	----	----
	L.P.N.	44.4	44.4	66.6	33.3	----	----	33.3	----	----	----
	AIDE	18.1	18.1	86.3	9.0	----	----	18.1	----	----	----
	ORD.	25.0	25.0	50.0	75.0	----	----	----	----	25.0	----
. Locating and setting up simple equipment: a. Bed rails	R.N.	59.0	59.0	45.4	45.4	----	----	----	9.0	4.5	----
	L.P.N.	100.0	100.0	75.0	75.0	----	----	25.0	----	----	----
	AIDE	66.6	66.6	93.3	26.6	----	----	----	----	----	----
	ORD.	----	----	33.3	100.0	----	----	----	----	----	----
b. Footboards	R.N.	63.6	63.6	50.0	45.4	----	----	----	9.0	4.5	----
	L.P.N.	100.0	100.0	75.0	75.0	----	----	25.0	----	----	----
	AIDE	62.5	62.5	93.7	31.2	----	----	----	----	----	----
	ORD.	----	----	33.3	100.0	----	----	----	----	----	----
c. Sandbags	R.N.	59.0	59.0	50.0	45.4	----	----	----	9.0	4.5	----
	L.P.N.	100.0	100.0	75.0	75.0	----	----	25.0	----	----	----
	AIDE	60.0	60.0	86.6	26.6	----	----	----	----	----	----
	ORD.	----	----	40.0	100.0	----	----	----	----	----	----
d. Heel coverlets.	R.N.	63.6	63.6	50.0	50.0	----	----	----	9.0	4.5	----
	L.P.N.	75.0	75.0	50.0	50.0	----	25.0	25.0	----	----	----
	AIDE	60.0	60.0	86.6	26.6	----	----	----	----	----	----
	ORD.	----	----	40.0	100.0	----	----	----	----	----	----
. Taking patient a. to x-ray	R.N.	35.4	35.4	41.9	35.4	----	----	6.4	6.4	3.2	16.1
	L.P.N.	16.6	16.6	66.6	33.3	----	----	16.6	----	----	----
	AIDE	4.1	4.1	79.1	33.3	----	----	----	----	8.3	----
	ORD.	12.5	12.5	12.5	100.0	----	----	----	----	----	12.5
b. Taking lab specimens to lab.	R.N.	25.8	29.0	58.0	25.8	----	----	----	3.2	3.2	----
	L.P.N.	16.6	16.6	66.6	33.3	----	----	16.6	----	----	----
	AIDE	8.3	8.3	87.5	25.0	----	----	16.6	----	----	----
	ORD.	----	----	12.5	100.0	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	HOUSE KEEPING	VOLUNTEER	OTHER	ANOTHER
12. Assisting in moving patient to another floor.	R.N.	60.7	60,7	46.4	28.5	----	----	10.7	--
	L.P.N.	85.7	85.7	57.1	28.5	----	----	----	--
	AIDE	35.2	35.2	100.0	11.7	----	----	----	--
	ORD.	----	----	50.0	100.0	----	----	----	--
13. Measuring food and fluid intake and output and totaling; a. Urine jugs	R.N.	83.8	80.6	58.0	29.0	----	----	----	3
	L.P.N.	87.5	87.5	87.5	50.0	----	----	----	--
	AIDE	64.0	64.0	96.0	8.0	----	----	4.0	--
	ORD.	37.5	37.5	37.5	87.5	----	----	----	--
b. Tube drainage	R.N.	86.6	83.3	63.3	33.3	----	----	----	3
	L.P.N.	100.0	100.0	75.0	50.0	----	----	----	--
	AIDE	68.0	68.0	84.0	4.0	----	----	----	--
	ORD.	37.5	37.5	37.5	87.5	----	----	----	--
c. IV intake at the end of each shift.	R.N.	86.6	86.6	46.6	20.0	----	----	----	3
	L.P.N.	100.0	100.0	62.5	37.5	----	----	----	--
	AIDE	80.0	80.0	56.0	4.0	----	----	----	--
	ORD.	50.0	50.0	25.0	75.0	----	----	----	--
14a. Checking food trays	R.N.	84.2	84.2	89.4	36.8	----	----	----	5
	L.P.N.	71.4	71.4	85.7	28.5	----	----	----	--
	AIDE	63.6	63.6	100.0	13.6	----	4.5	----	--
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	--
b. Delivering food trays	R.N.	84.2	84.2	89.4	36.8	----	----	----	5
	L.P.N.	71.4	71.4	85.7	28.5	----	----	----	-
	AIDE	63.6	63.6	100.0	13.6	----	4.5	----	-
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	-
c. Picking up food trays	R.N.	84.2	84.2	89.4	36.8	----	----	----	
	L.P.N.	71.4	71.4	85.7	28.5	----	----	----	-
	AIDE	60.8	60.8	95.6	13.0	----	4.3	----	-
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	-
d. Feeding patients.	R.N.	84.2	84.2	89.4	36.8	----	----	----	
	L.P.N.	71.4	71.4	85.7	28.5	----	----	----	-
	AIDE	60.8	60,8	95.6	13.0	----	4.3	----	-
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	-

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	HOUSE KEEPING	WARD SECR.	OTHER APPROPRIATE DEPT.	OTHER	H.N. OR DEPT. SUPERVISOR
15. Putting away the following: a. Supplies	R.N.	53.3	53.3	56.6	16.6	----	----	10.0	----	6.6	10.0
	L.P.N.	44.4	44.4	88.8	55.5	----	11.1	33.3	----	----	----
	AIDE	27.2	31.8	63.6	----	----	4.5	31.8	----	----	----
	ORD.	25.0	25.0	37.5	100.0	----	----	12.5	----	----	----
b. Equipment	R.N.	58.6	55.1	58.6	17.2	----	----	6.8	----	6.8	10.3
	L.P.N.	33.3	33.3	77.7	44.4	----	11.1	33.3	----	----	----
	AIDE	31.8	36.3	68.1	4.5	----	4.5	31.8	----	----	----
	ORD.	25.0	25.0	37.5	100.0	----	----	12.5	----	----	----
c. Instruments.	R.N.	62.0	58.6	58.6	17.2	----	----	6.8	----	6.8	10.3
	L.P.N.	33.3	33.3	77.7	44.4	----	11.1	33.3	----	----	----
	AIDE	31.8	36.3	68.1	4.5	----	4.5	31.8	----	----	----
	ORD.	25.0	25.0	37.5	100.0	----	----	12.5	----	----	----
16. a. Washing or soaking used equipment and supplies	R.N.	66.6	60.0	63.3	20.0	----	----	----	----	----	----
	L.P.N.	88.8	99.9	77.7	44.4	----	----	----	----	----	----
	AIDE	41.6	45.8	87.5	16.6	----	8.3	----	----	----	----
	ORD.	28.5	42.8	42.8	85.7	----	----	----	----	----	----
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	R.N.	72.4	68.9	65.5	20.6	----	----	----	----	----	----
	L.P.N.	88.8	99.9	77.7	44.4	----	----	----	----	----	----
	AIDE	45.8	45.8	87.5	20.8	----	8.3	----	----	----	----
	ORD.	25.0	37.5	37.5	87.5	----	----	----	----	----	----
17. Caring for deceased persons: a. Notifying appropriate persons	R.N.	60.7	60.7	28.5	10.7	10.7	----	----	----	3.5	3.5
	L.P.N.	57.1	57.1	57.1	----	42.8	----	----	----	----	----
	AIDE	52.9	52.9	35.2	5.8	----	----	----	29.4	----	----
	ORD.	25.0	25.0	75.0	100.0	----	----	----	----	----	----
b. Washing and tying patient	R.N.	69.5	69.5	56.5	26.0	----	----	----	----	4.3	----
	L.P.N.	71.4	85.7	71.4	----	14.2	----	----	----	----	----
	AIDE	42.1	42.1	94.7	21.0	----	----	----	----	----	----
	ORD.	25.0	25.0	75.0	100.0	----	----	----	----	----	----
c. Removing IV's, tubes, dressings	R.N.	81.8	81.8	45.4	13.6	----	----	----	----	4.5	----
	L.P.N.	71.4	85.7	71.4	----	14.2	----	----	----	----	----
	AIDE	47.3	47.3	73.6	15.7	5.2	----	----	----	----	----
	ORD.	37.5	37.5	62.5	87.5	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	HOUSE KEEPING	WARD SECR.	OTHER APPROPRIATE DEPT.	OTHER	H.N. OR DEPT. SUPERVISOR
d. Going to morgue to get litter	R.N.	68.1	63.6	45.4	22.7	----	----	----	----	4.5	----
	L.P.N.	71.4	71.4	85.7	14.2	14.2	----	----	----	----	----
	AIDE	26.3	26.3	89.4	26.3	----	----	----	----	----	----
	ORD.	37.5	37.5	62.5	87.5	----	----	----	----	----	----
e. Taking deceased person to morgue.	R.N.	71.4	66.6	47.6	23.8	----	----	----	----	4.7	----
	L.P.N.	71.4	71.4	85.7	14.2	14.2	----	----	----	----	----
	AIDE	36.8	36.8	94.7	26.3	----	----	----	----	----	----
	ORD.	37.5	37.5	62.5	87.5	----	----	----	----	----	----
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	R.N.	73.3	73.3	33.3	23.3	13.3	----	30.0	----	3.3	3.3
	L.P.N.	33.3	66.6	33.3	33.3	----	----	----	----	----	----
	AIDE	75.0	75.0	62.5	50.0	18.7	----	31.2	----	----	18.7
	ORD.	50.0	50.0	33.3	83.3	16.6	----	----	----	----	----
19. a. Collecting urine, stool, or sputum specimens to be sent to lab	R.N.	76.4	76.4	64.7	23.5	----	----	----	----	29.4	----
	L.P.N.	66.6	66.6	77.7	44.4	----	----	----	----	----	----
	AIDE	44.0	48.0	100.0	8.0	----	----	----	----	----	----
	ORD.	37.5	37.5	50.0	100.0	12.5	----	----	----	----	----
b. Performing routine tests: pre-meal glucose, guiac, albumen, Ph, hematocrits	**R.N.**	70.5	70.5	61.7	23.5	----	----	----	----	29.4	----
	L.P.N.	66.6	66.6	77.7	44.4	----	----	----	----	----	----
	AIDE	37.5	41.6	100.0	8.3	----	----	----	----	----	----
	ORD.	25.0	25.0	87.5	100.0	----	----	----	----	----	----
c. Obtaining a culture.	R.N.	75.0	67.8	10.7	3.5	39.2	----	----	3.5	3.5	----
	L.P.N.	50.0	50.0	25.0	25.0	37.5	----	----	----	----	----
	AIDE	90.0	90.0	5.0	----	10.0	----	----	----	----	----
	ORD.	50.0	50.0	25.0	75.0	----	----	----	25.0	----	----
20. Giving routine morning care: a. Assisting patient in bathing and dressing, brushing teeth	R.N.	90.9	90.9	59.0	31.8	----	----	----	4.5	4.5	----
	L.P.N.	62.5	62.5	75.0	----	----	----	----	----	----	----
	AIDE	59.0	63.6	100.0	18.1	----	----	----	----	----	----
	ORD.	83.3	83.3	83.3	83.3	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	OTHER	OTHER APPROPRIATE DEPT.
b. Turning or positioning patient	R.N.	87.5	87.5	54.1	29.1	4.1	4.1
	L.P.N.	62.5	62.5	75.0	----	----	----
	AIDE	62.5	66.6	95.8	20.8	----	----
	ORD.	83.3	83.3	83.3	100.0	----	----
c. Giving massages or alcohol rubs	R.N.	86.9	86.9	56.5	30.4	4.3	4.3
	L.P.N.	50.0	62.5	75.0	----	----	----
	AIDE	59.0	63.6	100.0	22.7	----	----
	ORD.	83.3	83.3	83.3	100.0	----	----
d. Walking with patients	R.N.	86.3	86.3	59.0	31.8	4.5	4.5
	L.P.N.	62.5	62.5	75.0	----	----	----
	AIDE	62.5	66.6	100.0	20.8	----	----
	ORD.	83.3	83.3	83.3	100.0	----	----
e. Getting patients in and out of bed	R.N.	86.3	86.3	59.0	31.8	4.5	4.5
	L.P.N.	62.5	62.5	75.0	----	----	----
	AIDE	62.5	66.6	100.0	20.8	----	----
	ORD.	83.3	83.3	83.3	100.0	----	----
f. Assisting with range of motion or other exercises	R.N.	80.9	80.9	57.1	33.3	4.7	9.5
	L.P.N.	50.0	75.0	75.0	----	----	----
	AIDE	36.3	40.9	72.7	----	9.0	9.0
	ORD.	100.0	100.0	100.0	100.0	----	----
g. Caring for bed sores with tincture of benzoine.	R.N.	85.7	85.7	57.1	33.3	4.7	4.7
	L.P.N.	42.8	71.4	71.4	----	----	----
	AIDE	63.6	68.1	72.7	13.6	----	----
	ORD.	83.3	83.3	66.6	83.3	----	----
21. Preparing patients for bed at night: a. Changing or straightening linen	R.N.	60.0	60.0	100.0	20.0	----	----
	L.P.N.	50.0	100.0	50.0	50.0	----	----
	AIDE	100.0	100.0	100.0	50.0	----	----
	ORD.	----	----	100.0	100.0	----	----
b. Turning or positioning patient	R.N.	60.0	60.0	100.0	20.0	----	----
	L.P.N.	50.0	100.0	50.0	50.0	----	----
	AIDE	100.0	100.0	100.0	50.0	----	----
	ORD.	----	----	100.0	100.0	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	OTHER	OTHER APPROPRIATE DEPT.	X-RAY TECH.	PHYSICAL THERAPIST
c. Assisting patient in washing and brushing teeth	R.N.	60.0	60.0	100.0	20.0	----	----	----	----
	L.P.N.	50.0	100.0	50.0	50.0	----	----	----	----
	AIDE	100.0	100.0	100.0	50.0	----	----	----	----
	ORD.	----	----	100.0	100.0	----	----	----	----
d. Giving massages	R.N.	60.0	60.0	100.0	20.0	----	----	----	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----	----
	AIDE	100.0	100.0	100.0	50.0	----	----	----	----
	ORD.	----	----	100.0	100.0				
22. Assisting patients with the following: a. Walkers	R.N.	53.3	53.3	46.6	20.0	13.2	26.6	----	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----	----
	AIDE	47.3	47.3	84.2	21.0	15.7	36.8	----	----
	ORD.	16.6	33.3	33.3	83.3	----	----	----	16.6
b. Wheelchairs	R.N.	56.2	56.2	43.7	18.7	12.5	31.2	----	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----	----
	AIDE	50.0	55.0	85.0	20.0	15.0	40.0	----	----
	ORD.	16.6	33.3	33.3	83.3	----	----	----	16.6
c. Crutches	R.N.	37.5	37.5	25.0	----	----	----	----	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----	----
	AIDE	50.0	55.0	75.0	20.0	15.0	45.0	----	----
	ORD.	16.6	33.3	16.6	66.6	----	----	----	16.6
d. Braces	R.N.	46.6	53.3	33.3	20.0	13.2	40.0	----	----
	L.P.N.	60.0	80.0	60.0	----	----	----	----	----
	AIDE	57.8	63.1	63.1	10.5	15.7	42.1		
	ORD.	16.6	33.3	16.6	66.6	----	----	----	16.6
e. Artificial limbs.	R.N.	53.3	53.3	33.3	20.0	13.2	40.0	----	----
	L.P.N.	75.0	75.0	75.0	62.5	----	----	----	----
	AIDE	57.8	63.1	63.1	10.5	15.7	42.1	----	----
	ORD.	20.0	40.0	20.0	60.0	----	----	----	20.0
23. Lifting patients on and off litters.	R.N.	80.6	77.4	58.0	51.6	3.2	----	3.2	----
	L.P.N.	44.4	33.3	88.8	44.4	----	----	----	----
	AIDE	82.6	82.6	100.0	69.5	----	----	----	----
	ORD.	37.5	37.5	75.0	100.0	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	OTHER APPROPRIATE DEPT.
24. Taking and recording: a. Temperature	R.N.	52.7	52.7	61.1	19.4	----	----	2.7
	L.P.N.	44.4	33.3	88.8	44.4	----	----	----
	AIDE	33.3	33.3	100.0	7.4	----	----	----
	ORD.	----	----	50.0	87.5	----	----	----
b. Pulse	R.N.	52.7	52.7	58.3	19.4	----	----	2.7
	L.P.N.	44.4	33.3	88.8	44.4	----	----	----
	AIDE	33.3	33.3	100.0	7.4	----	----	----
	ORD.	----	----	50.0	87.5	----	----	----
c. Respiration rate	R.N.	52.7	52.7	58.5	19.4	----	----	2.7
	L.P.N.	44.4	33.3	88.8	44.4	----	----	----
	AIDE	33.3	33.3	100.0	7.4	----	----	----
	ORD.	----	----	50.0	87.5	----	----	----
d. Blood pressure	R.N.	52.7	52.7	58.5	19.4	----	----	2.7
	L.P.N.	44.4	33.3	88.8	44.4	----	----	----
	AIDE	29.6	29.6	100.0	7.4	----	----	----
	ORD.	----	----	37.5	100.0	----	----	----
e. Weight.	R.N.	52.9	52.9	58.8	17.6	----	----	2.9
	L.P.N.	44.4	33.3	88.8	44.4	----	----	----
	AIDE	29.6	29.6	100.0	7.4	----	----	----
	ORD.	----	----	50.0	100.0	----	----	----
25. Assisting patient with Sitz bath.	R.N.	52.6	52.6	42.1	15.7	----	42.1	----
	L.P.N.	60.0	80.0	40.0	20.0	----	----	----
	AIDE	85.7	85.7	85.7	21.4	----	----	----
	ORD.	66.6	66.6	----	33.3	----	----	----
26. Applying or changing: a. Ice bags	R.N.	88.4	88.4	61.5	34.6	----	3.8	----
	L.P.N.	100.0	87.5	62.5	12.5	----	----	----
	AIDE	52.3	57.1	100.0	9.5	----	----	----
	ORD.	33.3	33.3	50.0	83.3	----	----	----
b. Hot water bottles	R.N.	85.1	85.1	59.2	33.3	----	3.8	----
	L.P.N.	100.0	87.5	62.5	12.5	----	----	----
	AIDE	50.0	55.0	95.0	10.0	----	----	----
	ORD.	28.5	28.5	42.8	85.7	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	OTHER APPROPRIATE DEPT.	LAB TECH.
c. Ace bandages	R.N.	86.6	86.6	50.0	26.6	----	3.3	3.3	----
	L.P.N.	100.0	77.7	55.5	11.1	----	----	----	----
	AIDE	63.6	68.1	77.2	9.0	4.5	----	----	----
	ORD.	16.6	16.6	50.0	100.0	----	----	----	----
d. Elastic stockings	R.N.	86.6	86.6	53.3	30.0	----	6.6	3.3	----
	L.P.N.	100.0	87.5	62.5	12.5	----	----	----	----
	AIDE	50.0	55.0	90.0	10.0	----	----	----	----
	ORD.	28.5	14.2	71.4	100.0	----	----	----	----
e. Binders	R.N.	89.6	89.6	48.2	27.5	----	3.4	----	----
	L.P.N.	99.9	88.8	55.5	11.1	----	----	----	----
	AIDE	47.3	52.6	94.7	10.5	----	----	----	----
	ORD.	20.0	20.0	60.0	100.0	----	----	----	----
f. Slings	R.N.	89.2	89.2	57.1	28.5	----	3.5	----	----
	L.P.N.	99.9	88.8	55.5	11.1	----	----	----	----
	AIDE	50.0	54.5	86.3	9.0	----	4.5	----	----
	ORD.	20.0	20.0	60.0	100.0	----	----	----	----
g. Restraints.	R.N.	85.1	85.1	55.5	33.3	----	----	3.8	----
	L.P.N.	100.0	100.0	62.5	12.5	----	----	----	----
	AIDE	50.0	54.5	90.9	9.0	----	----	----	----
	ORD.	25.0	25.0	50.0	87.5	----	----	----	----
27. Giving cleansing treatments: a. Enemas	R.N.	60.7	60.7	67.8	21.4	----	3.5	3.5	----
	L.P.N.	100.0	75.0	50.0	12.5	----	----	----	----
	AIDE	45.8	54.1	83.3	----	----	----	----	----
	ORD.	16.6	16.6	66.6	83.3	----	----	----	----
b. Douches.	R.N.	72.0	72.0	56.0	24.0	----	4.0	4.0	----
	L.P.N.	85.7	100.0	42.8	14.2	----	----	----	----
	AIDE	78.9	84.2	26.3	----	----	----	----	----
	ORD.	50.0	50.0	100.0	75.0	----	----	----	----
28. Caring for wounds: a. Dressing wounds	R.N.	93.5	93.5	6.4	----	12.9	----	3.2	----
	L.P.N.	88.8	88.8	11.1	11.1	22.2	----	----	----
	AIDE	100.0	100.0	14.2	----	----	----	----	----
	ORD.	71.4	71.4	14.2	28.5	28.5	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	H.N. OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPT.	LAB TECH.
b. Irrigating wounds	R.N.	90.6	90.6	6.2	----	12.5	----	----	3.1	----
	L.P.N.	88.8	88.8	11.1	11.1	22.2	----	----	----	----
	AIDE	100.0	100.0	14.2	----	----	----	----	----	----
	ORD.	71.4	71.4	14.2	28.5	28.5	----	----	----	----
c. Changing dressings.	R.N.	90.6	90.6	6.2	----	12.5	----	----	3.1	----
	L.P.N.	88.8	88.8	11.1	11.1	22.2	----	----	----	----
	AIDE	100.0	100.0	14.2	----	----	----	----	----	----
	ORD.	71.4	71.4	14.2	28.5	28.5	----	----	----	----
29. Feeding patient by tube.	R.N.	90.0	90.0	----	5.0	----	----	----	5.0	
	L.P.N.	75.0	100.0	----	----	----	----	----	----	----
	AIDE	100.0	100.0	23.5	----	----	----	----	----	----
	ORD.	100.0	100.0	16.6	33.3	----	----	----	----	----
30. Caring for precaution or reverse precaution patients.	R.N.	100.0	100.0	37.5	18.7	----	----	----	----	----
	L.P.N.	87.5	100.0	37.5	----	----	----	----	----	----
	AIDE	80.0	80.0	70.0	15.0	----	----	----	----	----
	ORD.	80.0	80.0	20.0	60.0	----	----	----	----	----
31. a. Setting up suture sets	R.N.	63.1	63.1	----	15.7	15.7	5.2	5.2	5.2	----
	L.P.N.	80.0	80.0	20.0	----	20.0	----	----	----	----
	AIDE	88.8	88.8	16.6	11.1	22.2	----	----	----	----
	ORD.	50.0	50.0	50.0	75.0	----	25.0	----	----	----
b. Assisting doctor in removing sutures.	R.N.	73.6	63.1	----	10.5	15.7	5.2	5.2	5.2	----
	L.P.N.	80.0	80.0	20.0	----	20.0	----	----	----	----
	AIDE	88.8	88.8	5.6	----	16.6	----	----	----	----
	ORD.	50.0	50.0	50.0	75.0	----	25.0	----	----	----
32. a. Doing cervical smears	R.N.	56.2	56.2	6.2	----	43.7	6.2	----	----	----
	L.P.N.	60.0	60.0	20.0	----	40.0	----	----	----	----
	AIDE	100.0	100.0	12.5	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----	----	----	----
b. Venereal disease smears.	R.N.	60.0	60.0	6.6	----	46.6	6.6	----	----	----
	L.P.N.	40.0	40.0	----	20.0	60.0	----	----	----	----
	AIDE	93.3	93.3	6.6	----	----	----	----	----	6.6
	ORD.	----	----	----	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	OTHER APPROPRIATE DEPT.	EKG TECH.
33. Assisting doctor in dermatology problems: a. Wart removal	R.N.	33.3	33.3	----	----	----	16.6	16.6	----
	L.P.N.	12.5	12.5	----	----	12.5	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----
b. Skin biopsies.	R.N.	40.0	40.0	----	----	----	20.0	20.0	----
	L.P.N.	12.5	12.5	----	----	12.5	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----
34. Caring for lacerations: a. Wash laceration	R.N.	77.7	77.7	----	----	11.1	11.1	11.1	----
	L.P.N.	100.0	100.0	25.0	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----
	ORD.	50.0	50.0	----	50.0	----	----	----	----
b. Dress laceration.	R.N.	77.7	77.7	----	----	11.1	11.1	11.1	----
	L.P.N.	100.0	100.0	25.0	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----
	ORD.	50.0	50.0	----	50.0	----	----	----	----
35. Using EKG equipment: a. Bringing equipment to bedside	R.N.	56.0	56.0	12.0	16.0	20.0	----	8.0	24.0
	L.P.N.	40.0	40.0	20.0	----	40.0	----	----	20.0
	AIDE	50.0	50.0	38.8	22.2	50.0	6.6	55.5	11.1
	ORD.	60.0	60.0	40.0	80.0	60.0	----	----	20.0
b. Setting up equipment	R.N.	58.3	58.3	8.3	8.3	29.1	----	8.3	25.0
	L.P.N.	40.0	40.0	20.0	----	40.0	----	----	20.0
	AIDE	58.8	58.8	5.8	----	88.2	5.8	52.9	11.7
	ORD.	60.0	60.0	40.0	80.0	60.0	----	----	20.0
c. Attaching electrodes to patient	R.N.	56.0	56.0	12.0	12.0	36.0	----	8.0	24.0
	L.P.N.	40.0	40.0	20.0	----	40.0	----	----	20.0
	AIDE	29.4	29.4	----	----	88.2	5.8	52.9	17.6
	ORD.	60.0	60.0	20.0	60.0	80.0	----	----	20.0
d. Operating EKG equipment.	R.N.	37.5	37.5	8.3	8.3	50.0	----	8.3	25.0
	L.P.N.	20.0	20.0	20.0	----	60.0	----	----	20.0
	AIDE	11.7	11.7	----	----	94.1	5.8	58.8	11.7
	ORD.	40.0	40.0	----	40.0	100.0	----	----	20.0

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	H.N. OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPT.	LAB TECH.	INHALATION THERAPY TECH.
36. Drawing blood.	R.N.	26.6	20.0	----	----	70.0	3.3	----	3.3	33.3	----
	L.P.N.	----	----	----	----	80.0	----	----	----	40.0	----
	AIDE	4.3	4.3	4.3	4.3	91.3	8.6	47.8	----	13.0	----
	ORD.	33.3	33.3	33.3	33.3	66.6	----	----	----	----	----
37. a. Ordering drugs from pharmacy	R.N.	93.7	84.3	----	----	3.1	----	13.3	----	----	----
	L.P.N.	85.7	85.7	14.2	14.2	42.8	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
b. Receiving drugs	R.N.	90.6	84.3	----	----	3.1	----	9.3	----	----	----
	L.P.N.	85.7	85.7	14.2	14.2	42.8	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
c. Putting drugs away.	R.N.	90.6	84.3	----	----	3.1	----	9.3	----	----	----
	L.P.N.	85.7	85.7	14.2	14.2	42.8	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
38. a. Administering specified medication	R.N.	91.4	88.5	----	----	2.8	----	2.8	2.8	----	----
	L.P.N.	100.0	100.0	----	----	33.3	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	85.7	85.7	----	14.2	----	----	----	----	----	----
b. Noting time and amounts on patients' charts.	R.N.	91.4	91.4	----	----	2.8	----	2.8	2.8	----	----
	L.P.N.	100.0	100.0	----	----	33.3	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
39. Performing functions related to oxygen masks, catheters: a. Bringing equipment to bedside	R.N.	86.2	82.7	10.3	10.3	6.8	----	----	----	----	10.3
	L.P.N.	57.1	57.1	14.2	----	14.2	----	----	----	----	42.8
	AIDE	80.9	85.7	14.2	----	4.7	----	----	----	----	23.8
	ORD.	50.0	50.0	12.5	62.5	----	----	----	----	----	12.5
b. Assembling	R.N.	86.2	82.7	10.3	10.3	6.8	----	----	----	----	10.3
	L.P.N.	57.1	57.1	14.2	----	14.2	----	----	----	----	42.8
	AIDE	80.9	85.7	14.2	----	4.7	----	----	----	----	13.8
	ORD.	57.1	57.1	14.2	71.4	14.2	----	----	----	----	14.2

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	INHALATION THERAPY TECH.
c. Inserting or applying	R.N.	96.2	92.5	11.1	11.1	7.4	11.1
	L.P.N.	57.1	57.1	14.2	----	14.2	42.8
	AIDE	95.0	95.2	14.2	----	4.7	13.8
	ORD.	57.1	57.1	14.2	71.4	14.2	14.2
d. Adjusting or caring for equipment	R.N.	92.8	89.2	10.7	7.1	7.1	10.7
	L.P.N.	57.1	57.1	14.2	----	14.2	42.8
	AIDE	85.7	95.0	13.8	----	4.7	13.8
	ORD.	57.1	57.1	14.2	71.4	14.2	14.2
e. Removing.	R.N.	86.2	86.2	10.3	6.8	6.8	10.3
	L.P.N.	57.1	57.1	14.2	----	14.2	42.8
	AIDE	95.0	95.2	38.0	4.7	4.7	19.0
	ORD.	57.1	57.1	14.2	71.4	14.2	14.2
41. Performing functions relating to IV's: a. Bringing equipment to bedside	R.N.	90.3	90.3	9.6	9.6	22.5	----
	L.P.N.	100.0	100.0	----	----	14.2	----
	AIDE	72.7	72.7	18.1	4.5	45.4	----
	ORD.	71.4	71.4	28.5	71.4	28.5	----
b. Assembling	R.N.	90.3	90.3	12.9	9.6	22.5	----
	L.P.N.	100.0	100.0	----	----	14.2	----
	AIDE	77.7	77.7	18.1	----	45.4	----
	ORD.	71.4	71.4	28.5	71.4	28.5	----
c. Inserting needle, starting IV, hanging bottles	R.N.	46.6	46.6	----	----	70.0	----
	L.P.N.	100.0	100.0	----	----	75.0	----
	AIDE	31.8	31.8	----	----	68.1	----
	ORD.	80.0	80.0	40.0	40.0	60.0	----
d. Changing labeled bottles	R.N.	96.7	96.7	19.3	16.1	12.9	----
	L.P.N.	100.0	100.0	12.5	12.5	12.5	----
	AIDE	86.3	86.3	22.7	----	----	----
	ORD.	71.4	71.4	28.5	42.8	28.5	----
e. Discontinuing IV service.	R.N.	93.5	93.5	19.3	12.9	12.9	----
	L.P.N.	100.0	100.0	12.5	12.5	12.5	----
	AIDE	86.3	86.3	18.1	----	9.0	----
	ORD.	100.0	100.0	40.0	60.0	40.0	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	H.N. OR DEPT. SUPERVISOR
42. Assisting physicians during treatment and examination of patients: a. Bringing equipment to bedside	R.N.	90.0	90.0	26.6	10.0	6.6	----	----
	L.P.N.	88.8	100.0	22.2	----	----	----	----
	AIDE	80.0	80.0	40.0	----	12.0	----	----
	ORD.	71.4	71.4	28.5	71.4	14.2	----	----
b. Preparing equipment or patient, assembling equipment	R.N.	96.6	96.6	26.6	10.0	6.6	----	----
	L.P.N.	88.8	100.0	22.2	----	----	----	----
	AIDE	80.0	80.0	32.0	----	12.0	----	----
	ORD.	71.4	71.4	28.5	71.4	14.2	----	----
c. Holding or restraining patient as necessary	R.N.	96.6	96.6	26.6	10.0	6.6	----	----
	L.P.N.	88.8	100.0	33.3	11.1	----	----	----
	AIDE	80.0	80.0	36.0	----	12.0	----	----
	ORD.	71.4	71.4	28.5	71.4	14.2	----	----
d. Removing and cleaning equipment afterwards.	R.N.	93.5	93.5	41.9	12.9	6.4	----	----
	L.P.N.	88.8	100.0	22.2	----	----	----	----
	AIDE	80.0	80.0	36.0	----	12.0	----	----
	ORD.	71.4	71.4	28.5	71.4	14.2	----	----
43. Counting narcotics and barbiturates at the change of each shift.	R.N.	93.0	90.0	----	----	10.0	6.6	----
	L.P.N.	100.0	100.0	----	----	44.4	----	----
	AIDE	100.0	100.0	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----
44. Observing and reporting to supervisor or physician: a. Patient's condition	R.N.	83.3	83.3	33.3	25.0	4.1	----	8.3
	L.P.N.	80.0	80.0	80.0	20.0	20.0	----	----
	AIDE	76.1	76.1	100.0	66.6	----	----	----
	ORD.	57.1	57.1	57.1	85.7	----	----	14.2
b. Patient's reaction to drugs, treatments, IV's	R.N.	83.3	83.3	33.3	25.0	4.1	----	8.3
	L.P.N.	80.0	80.0	80.0	20.0	20.0	----	----
	AIDE	76.1	76.1	100.0	66.6	----	----	----
	ORD.	57.1	57.1	57.1	85.7	----	----	14.2
c. Significant incidents.	R.N.	83.3	83.3	33.3	25.0	4.1	----	8.3
	L.P.N.	80.0	80.0	80.0	20.0	20.0	----	----
	AIDE	76.1	76.1	100.0	66.6	----	----	----
	ORD.	57.1	57.1	57.1	85.7	----	----	14.2

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	VOLUNTEER	WARD SECR.	OTHER	H.N. OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPT.	PSYCH. ATTENDANT
45. a. Serving emotional support to patients	R.N.	94.7	84.2	57.8	42.1	----	----	----	5.2	----	----	----
	L.P.N.	75.0	100.0	75.0	25.0	----	----	----	----	----	----	25.0
	AIDE	65.2	65.2	100.0	43.4	----	4.3	----	----	----	----	----
	ORD.	60.0	60.0	60.0	100.0	----	----	----	----	----	----	----
b. Entertaining patients (particularly children).	R.N.	93.7	87.5	68.7	50.0	----	----	----	6.2	----	----	----
	L.P.N.	75.0	100.0	75.0	25.0	----	----	----	----	----	----	25.0
	AIDE	69.2	69.2	100.0	30.7	----	7.6	----	7.6	----	----	----
	ORD.	60.0	60.0	60.0	100.0	----	----	----	----	----	----	----
46. Participating in cardiac arrest team: a. Bringing equipment to bedside	R.N.	85.7	80.9	14.2	23.8	19.0	----	----	----	----	----	----
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----	----	----
	AIDE	100.0	100.0	38.4	30.7	30.7	----	----	----	----	----	----
	ORD.	66.6	66.6	50.0	83.3	----	----	----	----	----	----	----
b. Call "444"	R.N.	81.8	77.2	13.6	22.7	18.1	----	9.0	----	----	----	----
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----	----	----
	AIDE	92.3	92.3	23.0	23.0	46.1	----	7.6	----	----	----	----
	ORD.	66.6	66.6	50.0	83.3	-----	----	----	----	----	----	----
c. Start external cardiac massage	R.N.	86.3	77.2	9.0	9.0	22.7	----	----	----	----	4.5	----
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----	----	----
	AIDE	53.8	53.8	----	----	100.0	----	----	----	----	----	----
	ORD.	66.6	66.6	50.0	83.3	----	----	----	----	----	----	----
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	R.N.	90.9	86.3	9.0	9.0	22.7	----	----	----	----	4.5	----
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----	----	----
	AIDE	53.8	53.8	----	----	92.3	----	----	----	----	----	----
	ORD.	66.6	66.6	50.0	83.3	----	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	VOLUNTEER	WARD SECR.	OTHER	H.N. OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPT.	PSYCH. ATTENDANT
46e. Remove, clean equipment, restock emergency cart afterwards.	R.N.	90.9	86.3	18.1	13.6	13.6	----	----	----	----	----	----
	L.P.N.	100.0	100.0	16.6	16.6	83.4	----	----	----	----	----	----
	AIDE	100.0	100.0	----	----	15.3	----	----	----	15.3	----	----
	ORD.	66.6	66.6	16.6	50.0	----	----	----	----	----	----	----
47. Beginning preparations for patients scheduled for surgery:												
a. Wash operative area	R.N.	62.5	56.2	31.2	18.7	----	----	----	6.2	----	18.7	----
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----	----	----
	AIDE	21.4	21.7	50.0	----	----	----	----	7.1	----	64.2	----
	ORD.	----	----	100.0	----	----	----	----	-----	----	----	----
b. Shave operative area	R.N.	66.6	60.0	40.0	20.0	----	----	----	6.6	----	20.0	----
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----	----	----
	AIDE	6.6	6.6	----	----	----	----	----	6.6	----	86.6	----
	ORD.	----	----	100.0	----	----	----	----	----	----	----	----
c. Instruct patient not to eat or drink	R.N.	62.5	56.2	37.5	18.7	----	----	----	6.2	----	18.7	----
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----	----	----
	AIDE	71.4	71.4	100.0	50.0	----	----	----	----	----	----	----
	ORD.	----	25.0	100.0	----	----	----	----	----	----	-----	-----
d. Remove jewelry, bobby	R.N.	64.7	58.8	35.2	17.6	----	----	----	5.8	----	17.6	----
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	VOLUNTEER	OTHER APPROPRIATE DEPT.	H.N. OR DEPT. SUPERVISOR
pins, dentures or other prostheses.	AIDE	66.6	66.6	100.0	46.6	----	----	----	----	6.6
	ORD.	----	25.0	100.0	----	----	----	----	----	----
48. Filling out accident reports.	R.N.	75.0	62.5	----	----	----	----	----	----	25.0
	L.P.N.	100.0	100.0	50.0	----	----	----	----	----	----
	AIDE	62.5	62.5	----	----	6.2	----	----	----	31.2
	ORD.	66.6	66.6	----	66.6	----	----	----	----	----
49. Filling out: a. Stamping lab slips and requisitions	R.N.	79.4	73.5	5.8	5.8	----	17.6	----	----	11.7
	L.P.N.	60.0	60.0	20.0	----	----	60.0	20.0	----	----
	AIDE	53.3	53.3	20.0	----	----	62.5	----	----	31.2
	ORD.	80.0	80.0	----	20.0	----	20.0	----	----	----
b. Making necessary arrangements for X-rays, lab work.	R.N.	72.7	66.6	3.0	----	----	21.2	----	----	12.1
	L.P.N.	60.0	60.0	20.0	----	----	60.0	20.0	----	----
	AIDE	66.6	66.6	----	----	5.5	16.6	----	----	55.5
	ORD.	80.0	80.0	----	20.0	----	----	----	----	----
50. Checking and posting orders in M.D. order books.	R.N.	56.5	56.5	----	----	----	----	----	----	34.3
	L.P.N.	75.0	75.0	----	----	----	----	----	----	25.0
	AIDE	21.4	28.5	7.1	----	----	----	----	----	71.4
	ORD.	100.0	100.0	----	----	----	----	----	----	----
51. Checking off diet manual each shift.	R.N.	68.0	60.0	12.0	16.0	----	----	----	4.0	28.0
	L.P.N.	80.0	80.0	----	----	----	20.0	----	----	20.0
	AIDE	28.5	28.5	14.2	28.5	----	28.5	----	----	64.2
	ORD.	100.0	100.0	----	50.0	----	----	----	----	----
52. a. Recommending (or)	R.N.	18.1	9.0	----	----	72.7	----	----	9.0	9.0
	L.P.N.	25.0	----	----	----	75.0	----	----	----	25.0
	AIDE	15.3	15.3	7.6	----	92.3	----	----	----	----
	ORD.	66.6	66.6	----	33.3	----	----	----	----	----
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	R.N.	18.1	9.0	----	----	72.7	----	----	9.0	9.0
	L.P.N.	25.0	----	----	----	75.0	----	----	----	25.0
	AIDE	----	----	----	----	100.0	----	----	----	----
	ORD.	66.6	66.6	----	33.3	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	VOLUNTEER	OTHER APPROPRIATE DEPT.	H.N. OR DEPT. SUPERVISOR
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	R.N.	42.8	42.8	----	----	----	----	----	7.1	35.7
	L.P.N.	50.0	25.0	----	----	----	----	----	----	50.0
	AIDE	7.6	7.6	----	----	----	----	----	----	92.3
	ORD.	----	----	----	----	----	----	----	----	----
54. Evaluating quality of nursing care.	R.N.	50.0	25.0	12.5	12.5	----	----	----	----	50.0
	L.P.N.	50.0	50.0	----	----	----	----	----	----	50.0
	AIDE	7.1	7.1	----	----	----	----	----	----	78.5
	ORD.	----	----	----	100.0	----	----	----	----	----
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	R.N.	66.6	44.4	11.1	11.1	----	----	----	----	33.3
	L.P.N.	50.0	50.0	----	----	----	----	----	----	50.0
	AIDE	7.6	7.6	15.3	7.6	----	----	----	----	84.6
	ORD.	----	----	----	----	----	----	----	----	----
56. Regularly inspecting rooms and wards for cleanliness and comfort.	R.N.	66.6	44.4	11.1	11.1	----	----	----	----	33.3
	L.P.N.	75.0	25.0	----	----	----	----	----	----	25.0
	AIDE	7.1	14.2	21.4	7.1	----	----	----	----	78.5
	ORD.	----	----	----	----	----	----	----	----	----
57. Accompanying physicians on rounds.	R.N.	58.3	50.0	8.3	8.3	----	----	----	----	33.3
	L.P.N.	60.0	20.0	----	-----	----	----	----	----	40.0
	AIDE	----	----	----	----	----	----	----	----	100.0
	ORD.	----	----	----	----	----	----	----	----	----
58. Investigating and adjusting complaints.	R.N.	55.5	33.3	11.1	11.1	11.1	----	----	----	33.3
	L.P.N.	75.0	25.0	----	----	----	----	----	----	25.0
	AIDE	7.6	7.6	15.3	7.6	----	----	----	----	84.6
	ORD.	----	----	----	----	----	----	----	----	----
59. Supervising preparation and maintenance of patients' clinical records.	R.N.	66.6	50.0	16.6	16.6	----	33.3	----	----	16.6
	L.P.N.	----	----	----	----	----	----	----	----	----
	AIDE	15.3	15.3	----	----	----	----	----	----	84.6
	ORD.	----	----	----	----	----	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	WARD SECRETARY	H.N. OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPARTMENT
60. Giving change-of-shift report.	R.N.	64.7	64.7	----	----	----	29.4	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	7.6	7.6	7.6	----	----	92.3	----
	ORD.	100.0	100.0	----	----	----	----	----
61. Teaching.	R.N.	75.0	50.0	----	----	----	25.0	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	64.2	64.2	64.2	42.8	----	35.7	7.1
	ORD.	50.0	50.0	----	50.0	----	----	----
62. Research.	R.N.	----	----	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----	----
63. Supervisory duties.	R.N.	----	----	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	8.3	8.3	----	----	----	91.6	----
	ORD.	----	----	----	----	----	----	----
64. Waiting for work.								
65. Caring for mother in labor: a. Admitting patient	R.N.	100.0	100.0	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	100.0	----	----	----	----
b. Obtaining necessary information from patient	R.N.	100.0	100.0	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	100.0	----	----	----	----
c. Checking vital signs and fetal heart frequently	R.N.	100.0	100.0	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	100.0	----	----	----	----
d. Prepping patient, given enema	R.N.	100.0	100.0	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	100.0	----	----	----	----
e. Providing emotional support.	R.N.	100.0	100.0	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	100.0	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	M.D.
66. Assisting in delivery room:					
a. Assisting in transferring patient to delivery room, and positioning, securing, and draping patient as necessary on table	R.N.	100.0	100.0	50.0	----
	L.P.N.	----	----	----	----
	AIDE	----	----	100.0	----
b. Setting-up delivery	R.N.	100.0	100.0	50.0	----
	L.P.N.	----	----	----	----
	AIDE	----	----	100.0	----
c. Directly assisting doctor as necessary	R.N.	100.0	100.0	50.0	----
	L.P.N.	----	----	----	----
	AIDE	----	----	100.0	----
d. Receiving baby from doctor, place in heated crib	R.N.	----	----	----	100.0
	L.P.N.	----	----	----	----
	AIDE	----	----	100.0	----
e. Giving suction and oxygen as necessary	R.N.	100.0	100.0	----	----
	L.P.N.	----	----	----	----
	AIDE	100.0	----	----	----
f. Putting silver nitrate in eyes of baby	R.N.	100.0	100.0	----	----
	L.P.N.	----	----	----	----
	AIDE	100.0	----	----	----
g. Clamping umbilical cord	R.N.	50.0	50.0	----	100.0
	L.P.N.	----	----	----	----
	AIDE	100.0	----	----	----
h. Measuring baby, taking foot prints	R.N.	100.0	100.0	----	----
	L.P.N.	----	----	----	----
	AIDE	----	----	----	----
i. Cleaning up both patient and used equipment, instruments afterwards.	R.N.	100.0	100.0	50.0	----
	L.P.N.	----	----	----	----
	AIDE	----	----	----	----

Table No. 3 Percentage Distribution of General Nursing Personnel's Responses to "Who Usually Performs This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	OTHER	OTHER APPROPRIATE DEPARTMENT
67. Caring for newborn baby: a. Moving baby from delivery room to nursery	R.N.	66.6	66.6	----	----	----	33.3
	L.P.N.	----	----	----	----	----	----
	AIDE	50.0	50.0	----	----	----	----
b. Washing, diapering	R.N.	----	----	----	----	50.0	50.0
	L.P.N.	----	----	----	----	----	----
	AIDE	50.0	50.0	50.0	----	----	----
c. Feeding	R.N.	----	----	----	----	----	100.0
	L.P.N.	----	----	----	----	----	----
	AIDE	50.0	50.0	50.0	----	----	----
d. Teaching mother how to breast-feed, bottle-feed, bathe, and generally care for baby.	R.N.	----	----	----	----	50.0	50.0
	L.P.N.	----	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----
68. Caring for mother after delivery: a. Encouraging mother to get up, take showers, force fluids, etc.	R.N.	100.0	100.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	50.0	50.0	100.0	----	----	----
b. Checking perineum sutures, breasts, fundus, and flow of patient.	R.N.	100.0	100.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	33.3	33.3	100.0	----	----	----
69. Preparing babies or children for afternoon naps, including: a. Bathe them	R.N.	100.0	100.0	100.0	100.0	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
b. Change diapers	R.N.	100.0	100.0	100.0	100.0	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
c. Giving them bottle, if applicable.	R.N.	100.0	100.0	100.0	100.0	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES'AIDE	ORDERLY	HOUSEKEEPING	WARD SECRETARY	VOLUNTEER	OTHER	HEAD NURSE OR DEPARTMENT SUPERV.	OTHER APPROPRIATE DEPARTMENT
1. Straightening up and cleaning the following:											
a. Patients' immediate furniture	R.N.	38.8	38.8	63.8	19.4	22.2	2.7	----	----	2.7	----
	L.P.N.	77.8	88.9	66.7	22.2	22.2	----	----	----	----	----
	AIDE	26.0	26.0	52.1	17.3	78.2	----	----	----	----	----
	ORD.	42.9	42.9	85.8	85.8	----	----	----	----	----	----
b. Nurses' station	R.N.	50.0	50.0	58.3	16.6	19.4	8.3	----	----	2.7	----
	L.P.N.	77.8	88.9	66.7	22.2	22.2	----	----	----	----	----
	AIDE	26.0	26.0	52.1	17.3	78.2	----	----	----	----	----
	ORD.	42.9	42.9	85.8	85.8	----	----	----	----	----	----
c. Utility rooms	R.N.	47.2	47.2	69.4	19.4	19.4	2.7	----	----	----	----
	L.P.N.	77.8	88.9	66.7	22.2	22.2	----	----	----	----	----
	AIDE	26.0	26.0	52.1	17.3	78.2	----	----	----	----	----
	ORD.	42.9	42.9	85.8	85.8	----	----	----	----	----	----
d. Treatment rooms	R.N.	47.2	47.2	58.3	16.6	19.4	2.7	----	----	----	----
	L.P.N.	77.8	88.9	66.7	22.2	22.2	----	----	----	----	----
	AIDE	26.0	26.0	52.1	17.3	78.2	----	----	----	----	----
	ORD.	42.9	42.9	85.8	85.8	----	----	----	----	----	----
e. Nourishment center	R.N.	38.2	38.2	61.7	20.5	20.5	2.9	----	----	----	----
	L.P.N.	66.7	77.8	77.8	22.2	33.3	----	----	----	----	----
	AIDE	21.7	21.7	47.8	13.0	73.9	----	----	----	----	4.3
	ORD.	42.9	42.9	85.8	85.8	----	----	----	----	----	----
f. Litters.	R.N.	38.2	38.2	67.6	20.5	17.6	2.9	----	----	----	----
	L.P.N.	66.7	77.8	77.8	22.2	22.2	----	----	----	----	----
	AIDE	26.0	26.0	52.1	17.3	78.2	----	----	----	----	----
	ORD.	42.9	42.9	85.8	85.8	----	----	----	----	----	----
2. Distributing mail and flowers.	R.N.	11.7	11.7	17.6	11.7	----	35.2	35.2	----	----	5.8
	L.P.N.	33.3	33.3	33.3	33.3	----	16.6	50.0	----	----	----
	AIDE	13.3	13.3	26.6	13.3	----	46.6	33.3	----	----	----
	ORD.	33.3	33.3	66.7	33.3	----	----	33.3	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	HOUSEKEEPING	WARD SECRETARY	VOLUNTEER	OTHER	HEAD NURSE OR DEPARTMENT SUPERV.	OTHER APPROPRIATE DEPARTMENT
3. Doing departmental errands: a. Going to pick up orthopedic equipment	R.N.	3.2	3.2	53.3	20.0	6.6	16.1	9.6	13.3	6.4	6.4
	L.P.N.	14.3	14.3	57.2	42.9	14.3	----	----	14.3	----	----
	AIDE	----	----	36.8	10.5	----	----	15.7	5.2	26.3	26.3
	ORD.	----	----	28.6	71.5	----	14.3	---	14.3	----	----
b. Going to Central Supply or laundry	R.N.	6.0	6.0	48.7	18.1	6.0	18.1	9.0	15.1	6.0	6.0
	L.P.N.	14.3	14.3	57.2	42.9	14.3	----	----	14.3	----	----
	AIDE	----	----	31.5	10.5	----	26.3	5.2	21.0	----	26.3
	ORD.	----	----	28.6	71.5	----	14.3	----	14.3	----	----
c. Going to IBM or records office	R.N.	----	----	50.0	20.0	3.3	20.0	10.0	16.6	6.6	6.6
	L.P.N.	14.3	14.3	57.2	42.9	14.3	----	----	14.3	----	----
	AIDE	----	----	27.7	11.1	----	27.7	5.5	22.2	----	27.7
	ORD.	----	----	33.3	66.7	----	----	16.6	16.6	----	----
d. Going to the operating room to help bring back a patient.	R.N.	6.8	6.8	46.4	21.4	----	17.2	10.3	10.7	6.8	6.8
	L.P.N.	14.3	14.3	57.2	42.9	14.3	----	----	14.3	----	----
	AIDE	----	----	33.3	16.6	----	11.1	5.5	22.2	----	33.3
	ORD.	----	----	42.9	71.5	----	----	----	14.3	----	14.3
4. Doing errands for patients: a. Making phone calls	R.N.	36.3	36.3	63.6	13.6	----	----	4.5	9.0	----	----
	L.P.N.	50.0	50.0	87.5	12.5	----	12.5	12.5	----	----	----
	AIDE	----	7.1	57.1	7.1	----	14.2	28.5	----	----	----
	ORD.	37.5	37.5	62.5	87.5	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	WARD SECRETARY	VOLUNTEER	OTHER	OTHER APPROPRIATE DEPARTMENT
b. Refilling water jugs	R.N.	34.7	34.7	60.8	13.0	----	8.6	8.6	----
	L.P.N.	37.5	50.0	87.5	12.5	12.5	12.5	----	----
	AIDE	13.3	20.0	80.0	13.3	----	26.6	----	----
	ORD.	42.9	42.9	71.5	85.8	----	----	----	----
c. Preparing snacks or drinks from nourishment station	R.N.	34.7	34.7	65.2	13.0	----	4.5	8.6	----
	L.P.N.	37.5	50.0	75.0	37.5	12.5	12.5	----	----
	AIDE	11.7	17.6	76.4	11.7	----	17.6	----	5.8
	ORD.	42.9	42.9	71.5	85.8	----	----	----	----
d. Getting an extra pillow.	R.N.	34.7	34.7	65.2	13.0	----	4.5	8.6	----
	L.P.N.	37.5	50.0	75.0	37.5	12.5	12.5	----	----
	AIDE	18.7	25.0	75.0	18.7	----	25.0	----	----
	ORD.	42.9	42.9	71.5	85.8	----	----	----	----
5. a. Giving and removing bedpans	R.N.	83.3	83.3	76.6	36.6	----	----	----	----
	L.P.N.	77.8	77.8	88.9	33.3	----	----	----	----
	AIDE	76.0	80.0	100.0	28.0	----	----	----	----
	ORD.	62.5	62.5	62.5	100.0	----	----	----	----
b. Assisting patient to use bedpan or urinal	R.N.	83.3	83.3	76.6	36.6	----	----	----	----
	L.P.N.	77.8	77.8	88.9	33.3	----	----	----	----
	AIDE	76.0	80.0	100.0	28.0	----	----	----	----
	ORD.	62.5	62.5	62.5	100.0	----	----	----	----
c. Helping patient to and from bathroom.	R.N.	82.7	82.7	79.3	37.9	----	----	----	----
	L.P.N.	77.8	77.8	88.9	33.3	-----	----	----	----
	AIDE	76.0	80.0	100.0	28.0	----	----	----	----
	ORD.	62.5	62.5	62.5	100.0	----	----	----	----
6. Making beds: a. Unoccupied	R.N.	76.9	76.9	76.9	30.7	----	----	3.8	----
	L.P.N.	85.8	85.8	100.0	42.9	----	----	----	----
	AIDE	68.1	72.7	100.0	22.7	----	----	4.5	----
	ORD.	71.5	71.5	71.5	100.0	----	----	14.3	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	WARD SECRETARY	OTHER	HEAD NURSE OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPARTMENT
b. Occupied	R.N.	80.7	80.7	73.0	30.7	----	3.8	----	----
	L.P.N.	85.8	85.8	100.0	42.9	----	----	----	----
	AIDE	68.1	72.7	100.0	22.7	----	4.5	----	----
	ORD.	71.5	71.5	71.5	100.0	----	14.3	----	----
c. Post-operative.	R.N.	80.0	80.0	72.0	32.0	----	4.0	----	----
	L.P.N.	85.8	85.8	100.0	42.9	----	----	----	----
	AIDE	68.1	72.7	100.0	22.7	----	4.5	----	----
	ORD.	71.5	71.5	71.5	100.0	----	14.3	----	----
7. Answering patient calls.	R.N.	68.1	68.1	68.1	36.3	13.6	4.5	----	----
	L.P.N.	25.0	25.0	75.0	25.0	25.0	----	----	----
	AIDE	81.2	81.2	87.5	31.2	18.7	----	----	----
	ORD.	71.5	71.5	71.5	100.0	----	----	----	----
8. Admitting patient:									
a. Completing clothes list or valuables list	R.N.	52.9	52.9	67.6	26.4	11.7	2.9	----	----
	L.P.N.	62.5	62.5	87.5	25.0	----	----	----	----
	AIDE	47.4	47.4	89.5	10.5	----	----	----	----
	ORD.	25.0	12.0	37.5	100.0	----	----	----	----
b. Getting patient comfortably settled in bed	R.N.	57.5	57.5	66.6	27.2	9.0	3.2	3.2	----
	L.P.N.	62.5	62.5	87.5	25.0	----	----	----	----
	AIDE	47.4	47.4	89.5	10.5	----	----	----	----
	ORD.	25.0	12.5	37.5	100.0	----	----	----	----
c. Notifying intern.	R.N.	57.5	57.5	48.4	15.1	12.1	3.2	9.0	----
	L.P.N.	62.5	62.5	87.5	25.0	----	----	----	----
	AIDE	68.4	63.2	63.2	10.5	----	----	----	----
	ORD.	37.5	25.0	37.5	87.5	----	----	----	----
9. Discharging patient:									
a. Returning clothes and valuables	R.N.	59.0	59.0	59.0	22.7	13.6	4.5	----	----
	L.P.N.	55.6	55.6	66.7	22.2	33.3	----	----	----
	AIDE	40.0	40.0	78.9	20.0	33.3	----	----	----
	ORD.	25.0	25.0	50.0	75.0	----	----	----	25.0

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	OTHER	HEAD NURSE OR DEPARTMENT SUPERV.	OTHER APPROPRIATE DEPARTMENT
b. Accompanying patient from floor.	R.N.	54.5	54.5	68.1	18.1	4.5	13.6	4.5	----	----
	L.P.N.	44.4	44.4	66.7	33.3	----	33.3	----	----	----
	AIDE	18.8	18.8	81.3	18.8	----	37.5	----	----	----
	ORD.	25.0	25.0	50.0	75.0	----	----	----	----	25.0
10. Locating and setting up simple equipment:										
a. Bed rails	R.N.	65.0	65.0	50.0	50.0	----	----	10.0	----	5.0
	L.P.N.	50.0	50.0	75.0	50.0	----	----	----	----	----
	AIDE	72.7	72.7	100.0	36.4	----	----	----	----	----
	ORD.	----	----	33.3	100.0	----	----	----	----	----
b. Footboards	R.N.	66.6	66.6	52.3	47.6	----	----	9.5	----	4.7
	L.P.N.	50.0	50.0	75.0	50.0	----	----	----	----	----
	AIDE	72.7	72.7	100.0	36.4	----	----	----	----	----
	ORD.	----	----	33.3	100.0	----	----	----	----	----
c. Sandbags	R.N.	66.6	66.6	52.3	47.6	----	----	9.5	----	4.7
	L.P.N.	50.0	50.0	75.0	50.0	----	----	----	----	----
	AIDE	72.7	72.7	100.0	36.4	----	----	----	----	----
	ORD.	----	----	33.3	100.0	----	----	----	----	----
d. Heel coverlets.	R.N.	66.6	66.6	52.3	47.6	----	----	9.5	----	4.7
	L.P.N.	25.0	25.0	50.0	25.0	25.0	----	----	----	----
	AIDE	72.7	72.7	100.0	36.4	----	----	----	----	----
	ORD.	----	----	33.3	100.0	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	HOUSEKEEPING	WARD SECRETARY	VOLUNTEER	OTHER	ANOTHER APPROPR. DEPARTMENT	X-RAY TECHNICIAN
11. Taking patient a. To X-ray	R.N.	23.3	23.3	43.3	43.3	----	6.6	----	10.0	3.3	13.3
	L.P.N.	----	----	66.7	50.0	----	16.6	----	----	----	----
	AIDE	----	----	38.1	28.6	----	----	4.8	9.5	42.9	----
	ORD.	12.5	12.5	12.5	100.0	----	----	----	----	----	12.5
b. Taking lab specimens to lab.	R.N.	16.6	16.6	53.3	53.3	----	10.0	----	3.3	6.6	----
	L.P.N.	----	----	66.7	50.0	----	16.6	----	----	----	----
	AIDE	----	----	42.9	----	----	14.3	4.8	9.5	33.3	----
	ORD.	----	----	12.5	100.0	----	----	----	----	----	----
12. Assisting in moving patient to another floor.	R.N.	50.0	50.0	50.0	35.7	----	----	----	10.7	----	----
	L.P.N.	85.8	85.8	57.2	28.6	----	----	----	----	----	----
	AIDE	46.2	46.2	69.2	38.5	----	----	----	----	----	----
	ORD.	----	----	50.0	100.0	----	----	----	----	----	----
13. Measuring food and fluid intake and output and totaling: a. Urine jugs	R.N.	63.6	63.6	60.6	27.2	----	3.0	----	----	3.0	----
	L.P.N.	100.0	100.0	75.0	50.0	----	----	----	----	----	----
	AIDE	57.9	63.2	100.0	15.8	----	----	----	----	----	----
	ORD.	50.0	50.0	37.5	100.0	----	----	----	----	----	----
b. Tube drainage	R.N.	63.6	63.6	60.6	27.2	----	3.0	----	----	3.0	----
	L.P.N.	100.0	100.0	75.0	50.0	----	----	----	----	----	----
	AIDE	57.9	63.2	100.0	15.8	----	----	----	----	----	----
	ORD.	50.0	50.0	37.5	100.0	----	----	----	----	----	----
c. IV Intake at the end of shift.	R.N.	86.6	86.6	40.0	16.6	----	----	----	----	3.3	----
	L.P.N.	100.0	100.0	62.5	37.5	----	----	----	----	----	----
	AIDE	68.4	73.7	68.4	15.8	----	----	----	----	----	----
	ORD.	50.0	50.0	25.0	100.0	----	----	----	----	----	----
14. a. Checking food trays	R.N.	83.3	83.3	94.4	33.3	----	----	----	----	5.5	----
	L.P.N.	71.5	71.5	85.8	28.6	----	----	----	----	----	----
	AIDE	52.9	64.7	82.4	----	----	----	5.9	5.9	5.9	----
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	HOUSEKEEPING	WARD SECRETARY	VOLUNTEER	OTHER	ANOTHER APPROPR. DEPARTMENT	HEAD NURSE OR DEPT. SUPERVISOR
b. Delivering food trays	R.N.	83.3	83.3	94.4	33.3	----	----	----	----	5.5	----
	L.P.N.	71.5	71.5	85.8	28.6	----	----	----	----	----	----
	AIDE	52.9	64.7	82.4	----	----	----	5.9	5.9	5.9	----
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	----	----	----
c. Picking up food trays	R.N.	83.3	83.3	94.4	33.3	----	----	----	----	5.5	----
	L.P.N.	71.5	71.5	85.8	28.6	----	----	----	----	----	----
	AIDE	52.9	64.7	82.4	----	----	----	5.9	5.9	5.9	----
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	----	----	----
d. Feeding patients.	R.N.	83.3	83.3	94.4	33.3	----	----	----	----	5.5	----
	L.P.N.	71.5	71.5	85.8	28.6	----	----	----	----	----	----
	AIDE	52.9	64.7	82.4	----	----	----	5.9	5.9	5.9	----
	ORD.	100.0	100.0	100.0	100.0	33.3	----	----	----	----	----
15. Putting away the following: a. Supplies	R.N.	33.3	33.3	63.3	16.6	----	13.3	----	6.6	----	13.3
	L.P.N.	44.4	44.4	88.9	55.6	----	----	----	----	----	----
	AIDE	26.7	33.3	60.0	----	6.7	33.3	6.7	----	----	----
	ORD.	25.0	25.0	37.5	100.0	----	12.5	----	----	----	----
b. Equipment	R.N.	34.4	34.4	65.5	17.2	----	10.3	----	6.8	----	13.7
	L.P.N.	44.4	44.4	88.9	55.6	----	----	----	----	----	----
	AIDE	26.7	33.3	60.0	----	6.7	33.3	6.7	----	----	----
	ORD.	25.0	25.0	37.5	100.0	----	12.5	----	----	----	----
c. Instruments.	R.N.	36.6	36.6	63.3	16.6	----	10.3	----	6.6	----	13.3
	L.P.N.	44.4	44.4	88.9	55.6	----	----	----	----	----	----
	AIDE	26.7	33.3	60.0	----	6.7	33.3	6.7	----	----	----
	ORD.	25.0	25.0	37.5	100.0	----	12.5	----	----	----	----
16. a. Washing or soaking used equipment and supplies	R.N.	64.2	60.7	75.0	28.5	----	----	----	----	----	3.5
	L.P.N.	88.9	88.9	77.8	44.4	----	----	----	----	----	----
	AIDE	37.5	43.8	93.8	25.0	----	----	----	----	----	----
	ORD.	28.6	28.6	42.9	85.8	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	HOUSEKEEPING	WARD SECRETARY	OTHER	HEAD NURSE OR DEPARTMENT SUPERV.	ANOTHER APPROPRIATE DEPARTMENT
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	R.N.	67.8	64.2	75.0	28.5	----	----	----	----	3.5	----
	L.P.N.	88.9	88.9	77.8	44.4	----	----	----	----	----	----
	AIDE	37.5	43.8	93.8	25.0	----	----	----	----	----	----
	ORD.	25.0	25.0	37.5	87.5	----	----	----	----	----	----
17. Caring for deceased persons: a. Notifying appropriate persons	R.N.	64.0	64.0	36.0	12.0	12.0	----	----	4.0	4.0	----
	L.P.N.	42.9	42.9	42.9	----	----	42.9	----	14.3	----	----
	AIDE	43.8	50.0	50.0	43.8	6.3	----	----	6.3	6.3	----
	ORD.	25.0	25.0	62.5	100.0	----	----	----	----	----	----
b. Washing and tying patient	R.N.	80.9	80.9	61.9	28.5	----	----	----	4.7	----	----
	L.P.N.	57.2	71.5	57.2	----	----	14.3	----	14.3	----	----
	AIDE	31.3	37.5	68.8	56.3	----	----	----	6.3	----	----
	ORD.	25.0	25.0	62.5	100.0	----	----	----	----	----	----
c. Removing IV's,tubes, dressings	R.N.	86.3	86.3	50.0	13.6	----	----	----	4.5	----	----
	L.P.N.	57.2	71.5	----	----	----	14.3	----	14.3	----	----
	AIDE	31.3	37.5	68.8	56.3	----	----	----	6.3	----	----
	ORD.	25.0	25.0	62.5	100.0	----	----	----	----	----	----
d. Going to morgue to get litter	R.N.	71.4	66.6	52.3	33.3	----	----	----	4.7	----	----
	L.P.N.	57.2	57.2	71.5	14.3	----	14.3	----	14.3	----	----
	AIDE	25.0	31.3	56.3	62.5	----	----	----	6.3	----	----
	ORD.	25.0	25.0	62.5	100.0	----	----	----	----	----	----
e. Taking deceased person to morgue.	R.N.	71.4	66.6	52.3	33.3	----	----	----	4.7	----	----
	L.P.N.	57.2	57.2	71.5	14.3	----	14.3	----	14.3	----	----
	AIDE	25.0	25.0	50.0	62.5	----	----	----	6.3	----	----
	ORD.	25.0	25.0	62.5	100.0	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	OTHER	ANOTHER APPROPR. DEPARTMENT
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	R.N.	66.6	66.6	26.6	16.6	20.0	33.3	3.5	3.5
	L.P.N.	50.0	100.0	50.0	50.0	----	----	----	----
	AIDE	80.0	70.0	70.0	70.0	10.0	20.0	----	----
	ORD.	50.0	50.0	33.3	83.4	16.6	----	----	----
19. a. Collecting urine, stool or sputum specimens to be sent to lab	R.N.	69.6	69.6	72.7	27.2	----	----	3.0	----
	L.P.N.	66.7	66.7	77.8	22.2	----	----	----	----
	AIDE	42.1	52.6	100.0	21.1	----	----	----	----
	ORD.	25.0	25.0	62.5	100.0	12.5	----	----	----
b. Performing routine tests: pre-meal glucose, guiac, albumen, Ph, hematocrits.	R.N.	66.6	66.6	66.6	27.2	----	----	3.0	----
	L.P.N.	66.7	66.7	77.8	22.2	----	----	----	----
	AIDE	33.3	38.9	100.0	22.2	----	----	----	----
	ORD.	25.0	25.0	75.0	100.0	----	----	----	----
c. Obtaining a culture.	R.N.	81.4	74.0	7.4	3.7	40.7	----	3.7	----
	L.P.N.	37.5	37.5	12.5	12.5	50.0	----	----	----
	AIDE	100.0	100.0	14.3	----	----	----	----	----
	ORD.	50.0	50.0	25.0	75.0	----	----	----	25.0
20. Giving routine morning care:									
a. Assisting patient in bathing and dressing, brushing teeth	R.N.	85.7	85.7	57.1	33.3	----	----	4.7	----
	L.P.N.	75.0	62.5	87.5	----	----	----	----	----
	AIDE	83.3	94.4	100.0	27.7	----	----	----	----
	ORD.	83.4	83.4	83.4	100.0	----	----	----	----
b. Turning or positioning patient	R.N.	87.5	87.5	50.0	29.1	----	----	4.1	----
	L.P.N.	75.0	62.5	87.5	----	----	----	----	----
	AIDE	83.3	94.4	100.0	27.7	----	----	----	----
	ORD.	83.4	83.4	83.4	100.0	----	----	----	----
c. Giving massages or alcohol rubs	R.N.	86.9	86.9	52.1	30.4	----	----	4.3	----
	L.P.N.	75.0	62.5	87.5	----	----	----	----	----
	AIDE	83.3	94.4	100.0	27.7	----	----	----	----
	ORD.	83.4	83.4	83.4	100.0	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	OTHER	OTHER APPROPRIATE DEPARTMENT	X-RAY TECHNICIAN	ORDERLY
d. Walking with patients	R.N.	86.3	86.3	54.5	4.5	----	----	31.8
	L.P.N.	75.0	62.5	87.5	----	----	----	----
	AIDE	83.3	94.4	100.0	----	----	----	27.7
	ORD.	83.4	83.4	83.4	----	----	----	100.0
e. Getting patients in and out of bed	R.N.	86.3	86.3	54.5	4.5	----	----	31.8
	L.P.N.	75.0	62.5	87.5	----	----	----	----
	AIDE	83.3	94.4	100.0	----	----	----	27.7
	ORD.	83.4	83.4	83.4	----	----	----	100.0
f. Assisting with range of motion or other exercises	R.N.	80.9	80.9	52.3	4.7	4.7	----	33.3
	L.P.N.	75.0	87.5	75.0	----	----	----	12.5
	AIDE	77.8	88.9	100.0	5.6	----	----	27.7
	ORD.	83.4	83.4	83.4	----	----	----	100.0
g. Caring for bed sores with tincture of benzoine.	R.N.	80.9	80.9	52.3	4.7	4.7	----	33.3
	L.P.N.	71.5	85.8	71.5	----	----	----	14.3
	AIDE	83.3	94.4	77.8	----	----	----	22.2
	ORD.	100.0	100.0	66.7	----	----	----	83.4
21. Preparing patients for bed at night:								
a. Changing or straightening linen	R.N.	60.0	60.0	100.0	----	----	----	20.0
	L.P.N.	50.0	100.0	50.0	----	----	----	50.0
	AIDE	----	100.0	100.0	----	----	----	----
	ORD.	----	----	100.0	----	----	----	100.0
b. Turning or positioning patient	R.N.	60.0	60.0	100.0	----	----	----	20.0
	L.P.N.	50.0	100.0	50.0	----	----	----	50.0
	AIDE	----	100.0	100.0	----	----	----	----
	ORD.	----	----	100.0	----	----	----	100.0
c. Assisting patient in washing and brushing teeth	R.N.	60.0	60.0	100.0	----	----	----	20.0
	L.P.N.	50.0	100.0	50.0	----	----	----	50.0
	AIDE	----	100.0	100.0	----	----	----	----
	ORD.	----	----	100.0	----	----	----	100.0
d. Giving massages.	R.N.	60.0	60.0	100.0	----	----	----	20.0
	L.P.N.	50.0	100.0	50.0	----	----	----	50.0
	AIDE	----	100.0	100.0	----	----	----	----
	ORD.	----	----	100.0	----	----	----	100.0

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	OTHER	OTHER APPROPRIATE DEPARTMENT	X-RAY TECHNICIAN
22. Assisting patients with the following:								
a. Walkers	R.N.	37.5	37.5	37.5	12.5	12.5	37.5	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----
	AIDE	50.0	57.1	71.4	21.4	35.7	7.1	----
	ORD.	28.6	42.9	42.9	85.8	----	14.3	----
b. Wheelchairs	R.N.	35.2	35.2	35.2	11.7	11.7	35.2	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----
	AIDE	50.0	57.1	71.4	21.4	35.7	7.1	
	ORD.	28.6	42.9	42.9	85.8	----	14.3	----
c. Crutches	R.N.	41.1	41.1	35.2	11.7	11.7	35.2	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----
	AIDE	46.7	53.3	66.7	20.0	33.3	13.3	----
	ORD.	28.6	42.9	42.9	85.8	----	14.3	----
d. Braces	R.N.	37.5	37.5	37.5	12.5	12.5	37.5	----
	L.P.N.	80.0	60.0	60.0	----	----	----	----
	AIDE	50.0	57.1	71.4	21.4	35.7	7.1	----
	ORD.	28.6	42.9	42.9	85.8	----	14.3	----
e. Artificial limbs.	R.N.	37.5	37.5	37.5	12.5	12.5	37.5	----
	L.P.N.	60.0	80.0	60.0	----	----	----	----
	AIDE	53.8	61.5	69.2	15.4	38.5	7.7	----
	ORD.	33.3	50.0	50.0	83.4	----	16.6	----
23. Lifting patients on and off litters.	R.N.	65.5	65.5	55.1	55.1	6.8	----	3.4
	L.P.N.	75.0	75.0	75.0	62.5	----	----	----
	AIDE	47.6	47.6	42.9	85.7	----	----	----
	ORD.	37.5	37.5	75.0	100.0	----	12.5	----
24. Taking and recording:								
a. Temperature	R.N.	60.0	60.0	71.4	22.8	----	2.8	----
	L.P.N.	44.4	33.3	88.9	44.4	----	----	----
	AIDE	55.6	61.1	94.4	27.7	----	----	----
	ORD.	----	----	50.0	87.5	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	OTHER	OTHER APPROPR. DEPARTMENT
b. Pulse	R.N.	60.0	60.0	71.4	22.8	----	2.8
	L.P.N.	44.4	33.3	88.9	44.4	----	----
	AIDE	55.6	61.1	94.4	27.7	----	----
	ORD.	----	----	50.0	87.5	----	----
c. Respiration rate	R.N.	60.0	60.0	71.4	22.8	----	2.8
	L.P.N.	44.4	33.3	88.9	44.4	----	----
	AIDE	55.6	61.1	94.4	27.7	----	----
	ORD.	----	----	50.0	87.5	----	----
d. Blood pressure	R.N.	60.0	60.0	71.4	22.8	----	2.8
	L.P.N.	44.4	33.3	88.9	44.4	----	----
	AIDE	55.6	61.1	94.4	27.7	----	----
	ORD.	----	----	50.0	87.5	----	----
e. Weight.	R.N.	60.0	60.0	71.4	22.8	----	2.8
	L.P.N.	44.4	33.3	88.9	44.4	-----	----
	AIDE	47.3	52.6	94.7	31.6	----	----
	ORD.	----	----	57.2	85.8	----	----
25. Assisting patient with Sitz bath.	R.N.	44.4	44.4	44.4	11.1	44.4	----
	L.P.N.	60.0	80.0	40.0	20.0	----	----
	AIDE	84.6	100.0	84.6	23.1	----	----
	ORD.	50.0	50.0	----	50.0	----	----
26. Applying or changing:							
a. Ice bags	R.N.	76.0	76.0	64.0	28.0	4.0	----
	L.P.N.	100.0	87.5	62.5	12.5	----	----
	AIDE	62.5	75.0	100.0	63.0	----	----
	ORD.	57.2	57.2	42.9	85.8	----	----
b. Hot water bottles	R.N.	77.7	77.7	59.2	25.0	3.7	----
	L.P.N.	100.0	87.5	62.5	12.5	----	----
	AIDE	62.5	75.0	100.0	63.0	----	----
	ORD.	57.2	57.2	42.9	85.8	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES'AIDE	ORDERLY	OTHER	OTHER APPROPRIATE DEPARTMENT
c. Ace bandages	**R.N.**	79.3	79.3	55.1	20.6	3.4	----
	L.P.N.	100.0	88.9	55.6	11.1	----	----
	AIDE	62.5	75.0	100.0	63.0	----	
	ORD.	42.9	42.9	42.9	100.0	----	
d. Elastic stockings	R.N.	75.8	75.8	58.6	24.1	6.8	3.4
	L.P.N.	100.0	87.5	62.5	12.5	----	----
	AIDE	66.7	73.3	100.0	6.7	----	----
	ORD.	37.5	37.5	62.5	100.0	----	----
e. Binders	R.N.	78.5	78.5	53.5	21.4	3.5	----
	L.P.N.	100.0	88.9	55.6	11.1	----	----
	AIDE	62.5	75.0	100.0	6.3	----	----
	ORD.	50.0	50.0	50.0	100.0	----	----
f. Slings	R.N.	81.4	81.4	59.2	22.2	3.7	----
	L.P.N.	100.0	88.9	55.6	11.1	----	----
	AIDE	62.5	75.0	100.0	6.3	----	----
	ORD.	50.0	50.0	50.0	100.0	----	----
g. Restraints.	R.N.	76.0	76.0	64.0	28.0	4.0	----
	L.P.N.	100.0	87.5	62.5	12.5	----	----
	AIDE	62.5	75.0	100.0	6.3	----	----
	ORD.	50.0	50.0	50.0	87.5	----	----
27. Giving cleansing treatments: a. Enemas	R.N.	60.7	60.7	67.8	17.8	3.5	3.5
	L.P.N.	100.0	75.0	50.0	12.5	----	----
	AIDE	56.3	62.5	87.5	12.5	----	----
	ORD.	16.6	16.6	83.4	83.4	----	----
b. Douches.	R.N.	61.5	61.5	61.5	19.2	3.8	3.8
	L.P.N.	85.8	100.0	42.9	14.3	----	----
	AIDE	71.4	78.6	21.4	----	----	----
	ORD.	40.0	40.0	100.0	80.0	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	HEAD NURSE OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPARTMENT
28. Caring for wounds: a. Dressing wounds	R.N.	93.5	93.5	6.4	----	12.9	3.2	----	----
	L.P.N.	88.9	88.9	11.1	11.1	22.2	----	----	----
	AIDE	93.3	100.0	13.3	----	----	----	----	----
	ORD.	71.5	71.5	14.3	57.2	28.6	----	----	----
b. Irrigating wounds	R.N.	93.5	93.5	6.4	----	12.9	3.2	----	----
	L.P.N.	88.9	88.9	11.1	11.1	22.2	----	----	----
	AIDE	93.3	100.0	13.3	----	----	----	----	----
	ORD.	71.5	71.5	14.3	57.2	28.6	----	----	----
c. Changing dressings.	R.N.	93.5	93.5	6.4	----	12.9	3.2	----	----
	L.P.N.	88.9	88.9	11.1	11.1	22.2	----	----	----
	AIDE	93.3	100.0	13.3	----	----	----	----	----
	ORD.	71.5	71.5	14.3	57.2	28.6	----	----	----
29. Feeding patient by tube.	R.N.	100.0	100.0	----	5.2	----	----	----	----
	L.P.N.	80.0	100.0	----	----	----	----	----	----
	AIDE	100.0	100.0	21.4	----	----	----	----	----
	ORD.	100.0	100.0	16.6	33.3	----	----	----	----
30. Caring for precaution or reverse precaution patients.	R.N.	100.0	100.0	35.2	----	----	----	----	----
	L.P.N.	87.5	100.0	37.5	----	----	----	----	----
	AIDE	87.5	93.8	37.5	12.5	----	----	----	----
	ORD.	80.0	80.0	20.0	60.0	----	----	----	----
31. a. Setting up suture sets	R.N.	75.0	65.0	15.0	20.0	15.0	5.0	5.0	----
	L.P.N.	80.0	80.0	20.0	----	20.0	----	----	----
	AIDE	100.0	100.0	10.0	10.0	----	----	----	----
	ORD.	50.0	50.0	50.0	75.0	----	25.0	----	----
b. Assisting doctor in removing sutures.	R.N.	75.0	65.0	15.0	20.0	15.0	5.0	5.0	----
	L.P.N.	80.0	80.0	20.0	----	20.0	----	----	----
	AIDE	100.0	100.0	10.0	10.0	----	----	----	----
	ORD.	50.0	50.0	50.0	75.0	----	25.0	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	HEAD NURSE OR DEPARTMENT SUPERV.	OTHER APPROPRIATE DEPARTMENT	LAB TECHNICIAN	EKG TECHNICIAN
32. a. Doing cervical smears	R.N.	56.2	56.2	31.2	6.2	31.2	6.2	----	----	----	----
	L.P.N.	60.0	60.0	20.0	----	40.0	----	----	----	----	----
	AIDE	100.0	100.0	16.7	----	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----	----	----	----	----
b. Venereal disease smears.	R.N.	56.2	56.2	31.2	6.2	31.2	6.2	----	----	----	----
	L.P.N.	40.0	40.0	----	20.0	60.0	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----	----	----	----	----
33. Assisting doctor in dermatology problems: a. Wart removal	R.N.	60.0	60.0	----	----	----	20.0	----	20.0	----	----
	L.P.N.	50.0	50.0	----	----	50.0	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
b. Skin biopsies.	R.N.	60.0	60.0	----	----	----	20.0	----	20.0	----	----
	L.P.N.	50.0	50.0	----	----	50.0	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
34. Caring for lacerations: a. Wash laceration	R.N.	77.7	77.7	----	----	11.1	11.1	----	11.1	----	----
	L.P.N.	100.0	100.0	25.0	----	----	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	50.0	50.0	----	50.0	----	----	----	----	----	----
b. Dress laceration.	R.N.	77.7	77.7	----	----	11.1	11.1	----	11.1	----	----
	L.P.N.	100.0	100.0	25.0	----	----	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	50.0	50.0	----	50.0	----	----	----	----	----	----
35. Using EKG equipment: a. Bringing equipment to bedside	R.N.	72.0	72.0	20.0	20.0	16.0	----	----	----	----	20.0
	L.P.N.	33.3	33.3	16.6	----	50.0	----	----	----	----	16.6
	AIDE	66.7	66.7	50.0	33.3	50.0	----	----	16.7	----	16.7
	ORD.	60.0	60.0	40.0	80.0	60.0	----	----	----	----	20.0

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	HEAD NURSE OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPARTMENT	LAB TECHNICIAN	EKG TECHNICIAN
b. Setting up equipment	R.N.	75.0	75.0	16.6	12.5	20.8	----	----	----	----	20.8
	L.P.N.	33.3	33.3	16.6	----	50.0	----	----	----	----	16.6
	AIDE	66.7	66.7	16.7	16.7	66.7	----	----	16.7	----	16.7
	ORD.	60.0	60.0	40.0	80.0	60.0	----	----	----	----	20.0
c. Attaching electrodes to patient	R.N.	69.2	69.2	19.2	15.3	26.9	----	----	----	----	19.2
	L.P.N.	33.3	33.3	16.6	----	50.0	----	----	----	----	16.6
	AIDE	50.0	50.0	16.7	16.7	66.7	----	----	16.7	----	16.7
	ORD.	60.0	60.0	20.0	60.0	80.0	----	----	----	----	20.0
d. Operating EKG equipment	R.N.	60.0	60.0	12.0	8.0	32.0	----	----	12.0	----	20.0
	L.P.N.	33.3	33.3	16.6	----	50.0	----	----	----	----	16.6
	AIDE	33.3	33.3	16.7	16.7	83.3	----	----	16.7	----	16.7
	ORD.	60.0	60.0	20.0	60.0	80.0	----	----	----	----	20.0
36. Drawing blood.	R.N.	36.6	33.3	----	----	66.6	3.3	----	----	30.0	----
	L.P.N.	----	----	----	----	80.0	----	----	----	40.0	----
	AIDE	11.1	11.1	----	----	88.9	11.1	----	11.1	33.3	----
	ORD.	33.3	33.3	33.3	33.3	66.7	----	----	----	33.3	----
37. a. Ordering drugs from pharmacy	R.N.	90.9	81.8	----	----	3.0	----	12.1	----	----	----
	L.P.N.	85.8	85.8	14.3	14.3	42.9	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
b. Receiving drugs	R.N.	93.5	87.0	----	----	3.2	----	6.4	----	----	----
	L.P.N.	85.8	85.8	14.3	14.3	42.9	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
c. Putting drugs away.	R.N.	93.5	87.0	----	----	3.2	----	6.4	----	----	----
	L.P.N.	85.8	85.8	14.3	14.3	42.9	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	HEAD NURSE OR DEPARTMENT SUPERV.	INHALATION TECHNICIAN
38. a. Administering specified medication	R.N.	100.0	91.1	----	----	2.9	----	----
	L.P.N.	100.0	100.0	11.1	----	33.3	----	----
	AIDE	100.0	100.0	----	----	----	----	----
	ORD.	85.8	85.8	----	14.3	----	----	----
b. Noting time and amounts on patients' charts.	R.N.	100.0	94.1	----	----	2.9	----	----
	L.P.N.	100.0	100.0	11.1	----	33.3	----	----
	AIDE	100.0	100.0	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----
39. Performing functions related to oxygen masks, catheters: a. Bringing equipment to bedside	R.N	82.1	78.5	14.2	17.8	10.7	----	10.7
	L.P.N.	42.9	42.9	28.6	----	14.3	----	42.9
	AIDE	84.6	92.3	46.2	----	----	----	15.4
	ORD.	50.0	50.0	12.5	62.5	12.5	----	12.5
b. Assembling	R.N.	82.1	78.5	14.2	17.8	10.7	----	10.7
	L.P.N.	42.9	42.9	28.6	----	14.3	----	42.9
	AIDE	83.3	91.7	41.7	----	----	----	16.7
	ORD.	57.2	57.2	14.3	57.2	14.3	----	14.3
c. Inserting or applying	R.N.	85.7	82.1	10.7	14.2	10.7	3.5	10.7
	L.P.N.	42.9	42.9	28.6	----	14.3	----	42.9
	AIDE	91.7	100.0	33.3	----	----	----	16.7
	ORD.	57.2	57.2	14.3	57.2	14.3	----	14.3
d. Adjusting or caring for equipment	R.N.	89.2	85.7	14.2	14.2	10.7	----	10.7
	L.P.N.	42.9	42.9	28.6	----	14.3	----	42.9
	AIDE	83.3	91.7	41.7	----	----	----	16.7
	ORD.	57.2	57.2	14.3	57.2	14.3	----	14.3
e. Removing.	R.N.	89.2	85.7	14.2	14.2	10.7	----	10.7
	L.P.N.	42.9	42.9	28.6	----	14.3	----	42.9
	AIDE	85.7	92.9	57.1	7.1	----	----	14.3
	ORD.	57.2	57.2	14.3	71.5	14.3	----	14.3
41. Performing functions relating to IV's: a. Bringing equipment to bedside	R.N.	90.3	90.3	19.3	19.3	19.3	----	----
	L.P.N.	100.0	100.0	----	----	14.3	----	----
	AIDE	100.0	100.0	20.0	10.0	30.0	----	----
	ORD.	71.5	71.5	28.6	57.2	28.6	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	OTHER	HEAD NURSE OR DEPT. SUPERVISOR	PSYCHIATRY ATTENDANT
b. Assembling	R.N.	90.3	90.3	19.3	19.3	19.3	----	----	----
	L.P.N.	100.0	100.0	----	----	14.3	----	----	----
	AIDE	100.0	100.0	10.0	----	30.0	----	----	----
	ORD.	71.5	71.5	28.6	57.2	28.6	----	----	----
c. Inserting needle, starting IV, hanging bottles	R.N.	53.3	53.3	----	----	63.3	----	----	----
	L.P.N.	66.7	66.7	----	----	50.0	----	----	----
	AIDE	66.7	66.7	11.1	----	55.6	----	----	----
	ORD.	100.0	100.0	40.0	60.0	40.0	----	----	----
d. Changing labeled bottles	R.N.	93.5	93.5	25.8	16.1	12.9	----	----	----
	L.P.N.	100.0	100.0	12.5	12.5	12.5	----	----	----
	AIDE	90.9	90.9	54.5	18.2	----	----	----	----
	ORD.	71.5	71.5	42.9	71.5	28.6	----	----	----
e. Discontinuing IV service.	R.N.	90.3	90.3	19.3	12.9	12.9	----	----	----
	L.P.N.	100.0	100.0	12.5	12.5	12.5	----	----	----
	AIDE	90.0	90.0	40.0	----	----	----	----	----
	ORD.	100.0	100.0	40.0	60.0	40.0	----	----	----
42. Assisting physicians during treatment and examination of patients: a. Bringing equipment to bedside	R.N.	87.5	87.5	31.2	12.5	6.2	----	----	----
	L.P.N.	88.9	100.0	22.2	----	----	----	----	----
	AIDE	69.2	69.2	61.5	7.7	7.7	----	----	----
	ORD.	71.5	71.5	28.6	71.5	14.3	----	----	----
b. Preparing equipment or patient, assembling equipment	R.N.	87.5	87.5	31.2	12.5	6.2	----	----	----
	L.P.N.	88.9	100.0	22.2	----	----	----	----	----
	AIDE	69.2	69.2	61.5	7.7	7.7	----	----	----
	ORD.	71.5	71.5	28.6	71.5	14.3	----	----	----
c. Holding or restraining patient as necessary	R.N.	87.5	87.5	31.2	12.5	6.2	----	----	----
	L.P.N.	88.9	100.0	22.2	----	----	----	----	----
	AIDE	69.2	69.2	61.5	7.7	7.7	----	----	----
	ORD.	71.5	71.5	28.6	71.5	14.3	----	----	----
d. Removing and cleaning equipment afterwards.	R.N.	78.7	78.7	42.4	15.1	6.0	----	----	----
	L.P.N.	88.9	100.0	22.2	----	----	----	----	----
	AIDE	69.2	69.2	61.5	7.7	7.7	----	----	----
	ORD.	71.5	71.5	28.6	71.5	14.3	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	OTHER	HEAD NURSE OR DEPARTMENT SUPERV.	OTHER APPROPRIATE DEPARTMENT	PSYCHIATRY ATTENDANT
43. Counting narcotics and barbiturates at the change of each shift.	R.N.	90.0	90.0	----	----	10.0	----	----	6.6	----	----
	L.P.N.	100.0	100.0	----	----	44.4	----	----	----	----	----
	AIDE	100.0	100.0	61.5	----	----	----	----	----	----	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
44. Observing and reporting to supervisor or physician: a. Patient's condition	R.N.	80.0	80.0	32.0	24.0	4.0	----	----	8.0	----	----
	L.P.N.	80.0	80.0	80.0	60.0	20.0	----	----	----	----	----
	AIDE	91.7	91.7	100.0	91.7	----	----	----	----	----	----
	ORD.	57.2	57.2	57.2	85.8	----	----	----	14.3	----	----
b. Patient's reaction to drugs, treatments, IV's	R.N.	80.0	80.0	32.0	24.0	4.0	----	----	8.0	----	----
	L.P.N.	80.0	80.0	80.0	60.0	20.0	----	----	----	----	----
	AIDE	91.7	91.7	100.0	91.7	----	----	----	----	----	----
	ORD.	57.2	57.2	57.2	85.8	----	----	----	14.3	----	----
c. Significant incidents.	R.N.	80.0	80.0	32.0	24.0	4.0	----	----	8.0	----	----
	L.P.N.	80.0	80.0	80.0	60.0	20.0	----	----	----	----	----
	AIDE	91.7	91.7	100.0	91.7	----	----	----	----	----	----
	ORD.	57.2	57.2	57.2	85.8	----	----	----	14.3	----	----
45. a. Serving emotional support to patients	R.N.	100.0	84.2	63.1	47.3	----	----	5.2	----	----	----
	L.P.N.	75.0	100.0	75.0	50.0	----	----	----	----	----	25.0
	AIDE	77.8	77.8	100.0	----	11.1	----	----	----	----	----
	ORD.	60.0	60.0	60.0	100.0	----	----	----	----	----	----
b. Entertaining patients (particularly children).	R.N.	100.0	82.3	70.5	52.9	----	----	5.8	----	----	----
	L.P.N.	75.0	100.0	75.0	50.0	----	----	----	----	----	25.0
	AIDE	77.8	77.8	88.9	----	11.1	----	11.1	----	----	----
	ORD.	60.0	60.0	60.0	100.0	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	OTHER	HEAD NURSE OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPARTMENT
46. Participating in cardiac arrest team: a. Bringing equipment to bedside	R.N.	80.9	76.1	19.0	23.0	14.2	----	----	----	----
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----
	AIDE	100.0	100.0	57.1	57.1	42.9	----	----	----	----
	ORD.	66.7	66.7	50.0	83.4	----	----	----	----	----
b. Call "444"	R.N.	85.7	80.9	19.0	28.5	14.2	4.7	----	----	----
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----
	AIDE	77.8	77.8	88.9	----	11.1	----	11.1	----	----
	ORD.	66.7	66.7	50.0	83.4	----	----	----	----	----
c. Start external cardiac massage	R.N.	85.7	80.9	14.2	14.2	28.5	----	----	----	4.7
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----
	AIDE	100.0	100.0	57.1	57.1	42.9	----	----	----	----
	ORD.	66.7	66.7	50.0	83.4	----	----	----	----	----
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	R.N.	90.4	85.7	14.2	14.2	14.2	----	----	----	4.7
	L.P.N.	100.0	100.0	20.0	20.0	80.0	----	----	----	----
	AIDE	100.0	100.0	57.1	57.1	42.9	----	----	----	----
	ORD.	66.7	66.7	50.0	83.4	----	----	----	----	----
e. Remove, clean equipment, restock emergency cart afterwards.	R.N.	95.2	90.4	28.5	23.0	9.5	----	----	----	----
	L.P.N.	100.0	100.0	----	----	83.4	----	----	----	----
	AIDE	85.7	85.7	14.3	14.3	57.1	----	----	28.6	----
	ORD.	66.7	66.7	33.3	66.7	----	----	----	----	----
47. Beginning preparations for patient scheduled for surgery: a. Wash operative area	R.N.	73.3	66.6	40.0	33.3	----	----	6.6	----	20.0
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----
	AIDE	20.0	30.0	60.0	10.0	----	----	10.0	----	40.0
	ORD.	----	----	----	100.0	----	----	----	----	----
b. Shave operative area	R.N.	66.6	60.0	46.6	33.3	----	----	6.6	----	26.6
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----	----	----	100.0
	ORD.	----	----	----	100.0	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	VOLUNTEER	OTHER	HEAD NURSE OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPARTMENT
c. Instruct patient not to eat or drink	R.N.	75.0	68.7	43.7	18.7	----	----	----	6.2	----	12.5
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----	----
	AIDE	58.3	66.7	100.0	50.0	----	----	----	----	----	----
	ORD.	----	----	75.0	100.0	----	----	----	----	----	----
d. Remove jewelry, bobby pins, dentures, or other prostheses.	R.N.	70.5	64.7	47.0	29.4	----	----	----	5.8	----	11.7
	L.P.N.	50.0	50.0	50.0	----	----	----	----	----	----	----
	AIDE	58.3	66.7	100.0	50.0	----	----	----	----	----	----
	ORD.	----	----	75.0	100.0	----	----	----	----	----	----
48. Filling out accident reports.	R.N.	75.0	75.0	----	----	----	----	----	----	25.0	----
	L.P.N.	100.0	100.0	----	----	----	----	----	----	----	----
	AIDE	75.0	75.0	----	----	12.5	----	----	----	25.0	----
	ORD.	66.7	66.7	----	66.7	----	----	----	----	----	----
49. Filling out: a. Stamping lab slips and requisitions	R.N.	48.4	45.4	9.0	3.0	----	36.3	----	9.0	12.1	----
	L.P.N.	60.0	60.0	20.0	----	----	60.0	20.0	----	----	----
	AIDE	42.9	42.9	----	----	----	71.4	----	----	28.6	----
	ORD.	80.0	80.0	20.0	40.0	----	20.0	----	----	----	----
b. Making necessary arrangements for X-ray, lab work.	R.N.	56.2	53.1	6.2	----	----	31.2	----	6.2	13.7	----
	L.P.N.	60.0	60.0	20.0	----	----	60.0	20.0	----	----	----
	AIDE	50.0	50.0	----	----	----	37.5	----	----	37.5	----
	ORD.	80.0	80.0	----	20.0	----	----	----	----	-----	----
50. Checking and posting orders in M.D. order books.	R.N.	53.1	50.0	----	----	----	3.3	----	3.3	36.6	----
	L.P.N.	75.0	75.0	----	----	----	----	----	----	25.0	----
	AIDE	42.9	57.1	14.3	----	----	----	----	----	42.9	----
	ORD.	100.0	100.0	----	----	----	----	----	----	----	----
51. Checking off diet manual each shift.	R.N.	60.0	52.0	8.0	12.0	----	----	----	4.0	28.0	8.0
	L.P.N.	75.0	75.0	----	----	---	25.0	----	----	25.0	----
	AIDE	50.0	50.0	16.7	----	----	----	----	----	50.0	----
	ORD.	50.0	50.0	----	100.0	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	WARD SECRETARY	HEAD NURSE OR DEPARTMENT SUPER.	OTHER APPROPRIATE DEPARTMENT
52. a. Recommending (or)	R.N.	27.2	18.1	----	----	72.7	----	9.0	9.0
	L.P.N.	50.0	25.0	----	----	75.0	----	25.0	----
	AIDE	33.3	33.3	16.7	----	100.0	----	----	----
	ORD.	66.7	66.7	----	33.3	----	----	----	----
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	R.N.	27.2	18.1	----	----	72.7	----	9.0	9.0
	L.P.N.	50.0	25.0	----	----	75.0	----	25.0	----
	AIDE	16.7	16.7	----	----	100.0	----	----	----
	ORD.	66.7	66.7	----	33.3	----	----	----	----
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	R.N.	53.8	46.1	----	----	----	----	38.4	7.6
	L.P.N.	50.0	25.0	----	----	----	----	50.0	----
	AIDE	16.7	16.7	----	----	----	----	83.3	----
	ORD.	----	----	----	----	----	----	----	----
54. Evaluating quality of nursing care.	R.N.	50.0	25.0	12.5	12.5	----	----	50.0	----
	L.P.N.	50.0	50.0	----	----	----	----	50.0	----
	AIDE	20.0	20.0	----	----	----	----	80.0	----
	ORD.	----	----	----	100.0	----	----	----	----
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	R.N.	66.6	44.4	11.1	11.1	----	----	33.3	----
	L.P.N.	50.0	50.0	----	----	----	----	50.0	----
	AIDE	16.7	16.7	33.3	16.7	----	----	66.7	----
	ORD.	----	----	----	----	----	----	----	----
56. Regularly inspecting rooms and wards for cleanliness and comfort.	R.N.	66.6	44.4	11.1	11.1	----	----	33.3	----
	L.P.N.	75.0	25.0	----	----	----	----	25.0	----
	AIDE	16.7	16.7	33.3	16.7	----	----	66.7	----
	ORD.	----	----	----	----	----	----	----	----
57. Accompanying physicians on rounds.	R.N.	61.5	53.8	7.6	7.6	----	----	38.4	----
	L.P.N.	60.0	20.0	----	----	----	----	40.0	----
	AIDE	----	----	----	----	----	----	100.0	----
	ORD.	----	----	----	----	----	----	----	----
58. Investigating and adjusting complaints.	R.N.	50.0	33.3	16.6	16.6	----	50.0	16.6	----
	L.P.N.	75.0	25.0	----	----	----	----	25.0	----
	AIDE	20.0	20.0	----	----	----	----	80.0	----
	ORD.	----	----	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	WARD SECRETARY	HEAD NURSE OR DEPT. SUPERVISOR	OTHER APPROPRIATE DEPARTMENT
59. Supervising preparation and maintenance of patients' clinical records.	R.N.	50.0	33.3	16.6	16.6	50.0	16.6	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	20.0	20.0	----	----	----	80.0	----
	ORD.	----	----	----	----	----	----	----
60. Giving change-of-shift report.	R.N.	70.5	64.7	----	----	----	29.4	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	14.3	28.6	14.3	----	----	71.4	----
	ORD.	100.0	100.0	----	----	----	----	----
61. Teaching.	R.N.	66.6	66.6	----	----	----	33.3	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	83.3	100.0	66.7	----	----	33.3	16.7
	ORD.	50.0	50.0	----	50.0	----	----	----
62. Research.	R.N.	----	----	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----	----
63. Supervisory duties.	R.N.	----	----	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	20.0	20.0	----	----	----	80.0	----
	ORD.	----	----	----	----	----	----	----
64. Waiting for work.	R.N.	----	----	----	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----	----
65. Caring for a mother in labor: a. Admitting patient	R.N.	100.0	100.0	50.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	M.D.	HEAD NURSE OR DEPT. SUPERVISOR
b. Obtaining necessary information from patient	R.N.	100.0	100.0	50.0	----	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----
c. Checking vital signs and fetal heart frequently	R.N.	100.0	100.0	----	----	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----
d. Preparing patient, given enema	R.N.	100.0	100.0	----	----	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----
e. Providing emotional support.	R.N.	100.0	100.0	50.0	----	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----
66. Assisting in delivery room: a. Assisting in transferring patient to delivery room, and positioning, securing, and draping patient as necessary on table	R.N.	100.0	100.0	50.0	----	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----
b. Setting-up delivery	R.N.	100.0	100.0	----	----	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----
c. Directly assisting doctor as necessary	R.N.	100.0	100.0	----	----	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----
d. Receiving baby from doctor, place in heated crib	R.N.	----	----	----	100.0	----
	L.P.N.	----	----	----	----	----
	AIDE	----	----	----	----	----
	ORD.	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	M.D.	ORDERLY	OTHER
e. Giving suction and oxygen as necessary	R.N.	100.0	100.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
f. Putting silver nitrate in eyes of baby	R.N.	100.0	100.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
g. Clamping umbilical cord	R.N.	50.0	50.0	----	100.0	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
h. Measuring baby, taking foot prints	R.N.	100.0	100.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
i. Cleaning up both patient and used equipment, instruments afterwards.	R.N.	100.0	100.0	50.0	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----

Table No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	OTHER	OTHER APPROPRIATE DEPARTMENT
67. Caring for newborn: a. Moving baby from delivery room to nursery	R.N.	66.6	66.6	33.3	----	----	33.3
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
b. Washing, diapering	R.N.	----	----	----	----	50.0	50.0
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
c. Feeding	R.N.	----	----	----	----	----	50.0
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
d. Teaching mother how to breast-feed, bottle-feed, bathe, and generally care for baby.	R.N.	----	----	----	----	50.0	50.0
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
68. Caring for mother after delivery: a. Encouraging mother to get up, take showers, force fluids, etc.	R.N.	100.0	100.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	----	----	----	----	----	----
	ORD.	----	----	----	----	----	----
b. Checking perineum sutures, breasts, fundus, and flow of patient.	R.N.	100.0	100.0	----	----	----	----
	L.P.N.	----	----	----	----	----	----
	AIDE	100.0	100.0	----	----	----	----
	ORD.	----	----	----	----	----	----

able No. 4 Percentage Distribution of General Nursing Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	OTHER	OTHER APPROPRIATE DEPARTMENT
9. Preparing babies or children for afternoon naps, including: a. Bathe them	R.N.	100.0	100.0	100.0	100.0	----	---
	L.P.N.	----	----	----	----	----	---
	AIDE	-----	----	----	----	----	---
	ORD.	----	----	----	----	----	---
b. Change diapers	R.N.	100.0	100.0	100.0	100.0	----	---
	L.P.N.	----	----	----	----	----	---
	AIDE	----	----	----	----	----	---
	ORD.	----	----	----	----	----	---
c. Giving them bottle, if applicable.	R.N.	100.0	100.0	100.0	100.0	----	---
	L.P.N.	----	----	----	----	----	---
	AIDE	----	----	----	----	----	---
	ORD.	----	----	----	----	----	---

Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
1. Straightening up and cleaning the following:												
a. Patients' immediate furniture	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Nurses station	57.1	42.9	---	50.0	50.0	---	33.3	66.7	---	66.7	33.3	---
c. Utility rooms	85.7	14.3	---	100.0	---	---	100.0	---	---	100.0	---	---
d. Treatment rooms	85.7	14.3	---	100.0	---	---	77.8	22.2	---	100.0	---	---
e. Nourishment center	42.9	57.1	---	50.0	50.0	---	88.9	11.1	---	100.0	---	---
f. Litters.	14.3	57.1	28.6	50.0	50.0	---	55.6	44.4	---	66.7	33.3	---
2. Distributing mail and flowers.	---	57.1	42.9	50.0	50.0	---	77.8	---	22.2	---	66.7	33.3
3. Doing departmental errands:												
a. Going to pick up orthopedic equipment	14.3	85.7	---	50.0	50.0	---	66.7	22.2	11.1	100.0	---	---
b. Going to Central Supply or laundry	28.6	71.4	---	100.0	---	---	88.9	---	11.1	100.0	---	---
c. Going to IBM or records office	14.3	85.7	---	50.0	50.0	---	77.8	22.2	---	66.7	---	33.3
d. Going to the operating room to help bring back a patient.	28.6	71.4	---	100.0	---	---	88.9	11.1	---	100.0	---	---
4. Doing errands for patients:												
a. Making phone calls	57.1	14.3	28.6	100.0	---	---	66.7	33.3	---	---	100.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
4. b. Refilling Water jugs	85.7	14.3	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Preparing snacks or drinks from nourishment station	85.7	14.3	---	100.0	---	---	100.0	---	---	100.0	---	---
d. Getting an extra pillow.	100.0	---	---	50.0	50.0	---	100.0	---	---	100.0	---	---
5. a. Giving and removing bedpans	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Assisting patient to use bedpan or urinal	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Helping patient to and from bathroom.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
6. Making beds:												
a. Unoccupied	100.0	---	---	100.0	---	---	77.8	---	22.2	33.3	---	66.7
b. Occupied	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Post-operative.	100.0	---	---	100.0	---	---	77.8	---	22.2	33.3	---	66.7
7. Answering patient calls.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
8. Admitting patient:												
a. Completing clothes list or valuables list	71.4	28.6	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Getting patient comfortably settled in bed	85.7	14.3	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Notifying intern.	100.0	---	---	100.0	---	---	11.1	88.9	---	33.3	66.7	---

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Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
9. Discharging patient:												
a. Returning clothes and valuables	57.1	14.3	28.6	100.0	---	---	66.7	---	33.3	33.3	---	66.7
b. Accompanying patient from floor.	14.3	57.1	28.6	50.0	50.0	---	55.6	22.2	22.2	33.3	---	66.7
10. Locating and setting up simple equipment:												
a. Bed rails	---	100.0	---	100.0	---	---	100.0	---	---	66.7	---	33.3
b. Footboards	100.0	---	---	100.0	---	---	100.0	---	---	66.7	---	33.3
c. Sandbags	85.7	---	14.3	100.0	---	---	100.0	---	---	66.7	---	33.3
d. Heel coverlets	100.0	---	---	100.0	---	---	100.0	---	---	66.7	---	33.3
Taking patient												
a. to X-ray: walking with him, by wheelchair, by litter	28.6	71.4	---	100.0	---	---	100.0	---	---	100.0	---	---
b. taking lab specimens to lab.	57.1	42.9	---	100.0	---	---	100.0	---	---	100.0	---	---
12. Assisting in moving patient to another floor.	57.1	14.3	28.6	100.0	---	---	88.9	---	11.1	100.0	---	---
13. Measuring food and fluid intake and output and totaling:												
a. Urine jugs	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---

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Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
13. b. Tube drainage	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. IV intake at the end of each shift.	100.0	---	---	100.0	---	---	88.9	11.1	---	100.0	---	---
14. a. Checking food trays	71.4	---	28.6	100.0	---	---	88.9	---	11.1	33.3	---	66.7
b. Delivering food trays	71.4	---	28.6	100.0	---	---	88.9	---	11.1	33.3	---	66.7
c. Picking up food trays	71.4	---	28.6	100.0	---	---	88.9	---	11.1	33.3	---	66.7
d. Feeding patients.	71.4	---	28.6	100.0	---	---	88.9	---	11.1	33.3	---	66.7
15. Putting away the following:												
a. Supplies	100.0	---	---	100.0	---	---	66.7	33.3	---	100.0	---	---
b. Equipment	100.0	---	---	100.0	---	---	66.7	33.3	---	100.0	---	---
c. Instruments.	100.0	---	---	100.0	---	---	55.6	44.4	---	100.0	---	---
16. a. Washing or soaking used equipment and supplies	85.7	---	14.3	100.0	---	---	100.0	---	---	66.7	---	33.3
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	57.1	14.3	28.6	100.0	---	---	100.0	---	---	100.0	---	---
17. Caring for deceased persons:												
a. Notifying appropriate persons;	71.4	14.3	14.3	100.0	---	---	11.1	77.8	11.1	---	100.0	---
b. Washing and tying patient;	85.7	---	14.3	100.0	---	---	88.9	---	11.1	100.0	---	---
c. Removing IV's, tubes, dressings;	85.7	---	14.3	100.0	---	---	77.8	11.1	11.1	100.0	---	---
d. Going to morgue to get litter;	28.6	57.1	14.3	100.0	---	---	88.9	---	11.1	100.0	---	---
e. Taking deceased person to morgue.	28.6	57.1	14.3	100.0	---	---	88.9	---	11.1	100.0	---	---

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Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
19. a. Collecting urine, stool, or sputum specimens to be sent to lab;	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Performing routine tests: pre-meal glucose, Guiac, Albumen, Ph, Hematocrits	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Obtaining a culture.	71.4	---	28.6	100.0	---	---	11.1	88.9	---	33.3	66.7	---
20. Giving routine morning care:												
a. Assisting patient in bathing and dressing, brushing teeth	57.1	---	42.9	100.0	---	---	77.8	---	22.2	33.3	---	66.7
b. Turning or positioning patient	85.7	---	14.3	100.0	---	---	100.0	---	---	100.0	---	---
c. Giving massages or alcohol rubs	85.7	---	14.3	100.0	---	---	100.0	---	---	100.0	---	---
d. Walking with patients	71.4	---	28.6	100.0	---	---	100.0	---	---	100.0	---	---
e. Getting patients in and out bed	71.4	---	28.6	100.0	---	---	100.0	---	---	100.0	---	---
f. Assisting with range of motion or other exercises	57.1	---	42.9	100.0	---	---	77.8	---	22.2	66.7	---	33.3
g. Caring for bed sores with tincture of benzoine.	85.7	---	14.3	50.0	---	50.0	100.0	---	---	100.0	---	---

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FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
21. Preparing patients for bed at night:												
a. Changing or straightening linen	14.3	---	85.7	---	---	100.0	---	---	100.0	---	---	100.0
b. Turning or positioning patient	14.3	---	85.7	---	---	100.0	---	---	100.0	---	---	100.0
c. Assisting patient in washing and brushing teeth	14.3	---	85.7	---	---	100.0	---	---	100.0	---	---	100.0
d. Giving massages.	14.3	---	85.7	---	---	100.0	---	---	100.0	---	---	100.0
22. Assisting patients with the following:												
a. Walkers	57.1	---	42.9	100.0	---	---	100.0	---	---	66.7	33.3	---
b. Wheelchairs	71.4	---	28.6	100.0	---	---	100.0	---	---	100.0	---	---
c. Crutches	71.4	---	28.6	100.0	---	---	100.0	---	---	66.7	33.3	---
d. Braces	42.9	---	57.1	50.0	---	50.0	44.4	55.6	---	33.3	33.3	33.3
e. Artificial limbs.	28.6	---	71.4	50.0	---	50.0	55.6	44.4	---	33.3	33.3	33.3
23. Lifting patients on and off the litters.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
24. Taking and recording:												
a. Temperature	100.0	---	---	100.0	---	---	100.0	---	---	66.7	33.3	---
b. Pulse	100.0	---	---	100.0	---	---	100.0	---	---	66.7	33.3	---
c. Respiration rate	100.0	---	---	100.0	---	---	100.0	---	---	66.7	33.3	---
d. Blood pressure	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
e. Weight.	100.0	---	---	100.0	---	---	88.9	---	11.1	33.3	---	66.7
25. Assisting patient with Sitz bath.	71.4	---	28.6	100.0	---	---	66.7	---	33.3	33.3	---	66.7

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	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
26. Applying or changing:												
a. Ice bags	100.0	---	---	100.0	---	---	100.0	---	---	66.7	---	33.3
b. Hot water bottles	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Ace bandages	100.0	---	---	100.0	---	---	77.8	11.1	11.1	66.7	33.3	---
d. Elastic stockings	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
e. Binders	100.0	---	---	100.0	---	---	100.0	---	---	33.3	66.7	---
f. Slings	85.7	---	14.3	100.0	---	---	77.8	11.1	11.1	66.7	33.3	---
g. Restraints.	100.0	---	---	100.0	---	----	100.0	---	---	100.0	---	---
27. Giving cleansing treatments:												
a. Enemas	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Douches.	71.4	---	28.6	100.0	---	---	22.2	77.8	---	---	100.0	---
28. Caring for wounds:												
a. Dressing wounds	100.0	---	---	100.0	---	---	---	100.0	---	33.3	66.7	---
b. Irrigating wounds	100.0	---	---	100.0	---	---	11.1	88.9	---	33.3	66.7	---
c. Changing dressings.	100.0	---	---	100.0	---	---	44.4	55.6	---	33.3	66.7	---
29. Feeding patient by tube.	85.7	---	14.3	50.0	---	50.0	44.4	55.6	---	100.0	---	---
30. Caring for precaution or reverse precaution patients.	100.0	---	---	100.0	---	---	100.0	---	---	33.3	33.3	33.3
31. a. Setting up suture sets;	57.1	14.3	28.6	100.0	---	---	77.8	22.2	---	66.7	---	33.3
b. Assisting doctor in removing sutures.	57.1	14.3	28.6	100.0	---	---	77.8	22.2	---	66.7	---	33.3
32. a. Doing cervical smears	14.3	14.3	71.4	---	50.0	50.0	33.3	55.6	11.1	---	66.7	33.3
b. Venereal disease smears.	---	28.6	71.4	---	50.0	50.0	22.2	66.7	11.1	33.3	33.3	33.3

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Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
33. Assisting doctor in dermatology problems:												
a. Wart removal	---	---	100.0	---	---	100.0	---	77.8	22.2	---	---	100.0
b. Skin biopsies.	14.3	---	85.7	50.0	---	50.0	---	77.8	22.2	---	---	100.0
34. Caring for lacerations:												
a. Wash laceration	14.3	---	85.7	---	---	100.0	---	22.2	77.8	66.7	---	33.3
b. Dress laceration.	14.3	---	85.7	---	---	100.0	---	22.2	77.8	66.7	---	33.3
35. Using EKG equipment:												
a. Bringing equipment to bedside	71.4	14.3	14.3	100.0	---	---	77.8	22.2	---	100.0	---	---
b. Setting up equipment	85.7	---	14.3	100.0	---	---	33.3	66.7	---	66.7	33.3	---
c. Attaching electrodes to patient	85.7	---	14.3	---	50.0	50.0	22.2	77.8	---	66.7	33.3	---
d. Operating EKG equipment.	14.3	71.4	14.3	---	100.0	---	---	100.0	---	100.0	---	---
36. Drawing blood.	42.9	57.1	---	---	100.0	---	---	100.0	---	---	100.0	---
37. a. Ordering drugs from pharmacy	85.7	14.3	---	100.0	---	---	---	100.0	---	---	100.0	---
b. Receiving drugs	85.7	14.3	---	100.0	---	---	---	100.0	---	---	100.0	---
c. Putting drugs away.	85.7	14.3	---	100.0	---	---	---	100.0	---	---	100.0	---
38. a. Administering specified medication	100.0	---	---	100.0	---	---	33.3	66.7	---	66.7	33.3	---
b. Noting time and amounts on patients' charts.	100.0	---	---	100.0	---	---	22.2	77.8	---	33.3	66.7	---

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FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
39. Performing functions related to oxygen masks, catheters:												
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---						
Oxygen masks							77.8	22.2	---	33.0	67.0	---
Catheters							88.9	11.1	---	100.0	---	---
b. Assembling Oxygen masks							55.6	44.4	---	33.0	67.0	---
Catheters							50.0	50.0	---	67.0	33.0	---
c. Inserting or applying												
Oxygen masks							33.3	66.7	---	33.0	67.0	---
Catheters							---	100.0	---	67.0	33.0	---
d. Adjusting or caring for equipment												
Oxygen masks							44.4	55.6	---	33.0	67.0	---
Catheters							33.3	66.7	---	100.0	---	---
e. Removing. Oxygen masks							66.7	33.3	---	33.0	67.0	---
Catheters							77.8	22.2	---	67.0	33.0	---
41. Performing functions relating to IV's:												
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	66.7	33.3	---	100.0	---	---
b. Assembling	100.0	---	---	100.0	---	---	33.3	66.7	---	100.0	---	---
c. Inserting needle, starting IV, hanging bottles	28.6	71.4	---	---	100.0	---	---	100.0	---	---	100.0	---
d. Changing labeled bottles	100.0	---	---	100.0	---	---	88.9	11.1	---	100.0	---	---
e. Discontinuing IV service.	100.0	---	---	100.0	---	---	88.9	11.1	---	66.7	33.3	---

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FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
42. Assisting physicians during treatment and examination of patients:												
a. Bringing equipment to bedside	85.7	---	14.3	100.0	---	---	77.8	22.2	---	100.0	---	---
b. Preparing equipment or patient, assembling equipment	85.7	---	14.3	100.0	---	---	66.7	33.3	---	100.0	---	---
c. Holding or restraining patient as necessary	85.7	---	14.3	100.0	---	---	88.9	11.1	---	100.0	---	---
d. Removing and cleaning equipment afterwards.	85.7	---	14.3	100.0	---	---	88.9	11.1	---	100.0	---	---
43. Counting narcotics and barbiturates at the change of each shift.	100.0	---	---	100.0	---	---	---	100.0	---	33.3	66.7	---
44. Observing and reporting to supervisor or physician:												
a. Patient's condition	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Patient's reaction to drugs, treatments, IV's	100.0	---	---	100.0	----	---	100.0	---	---	100.0	---	---
c. Significant incidents.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
45. a. Serving emotional support to patients	100.0	---	---	100.0	---	---	88.9	11.1	---	100.0	---	---
b. Entertaining patients (particularly children).	---	---	100.0	---	---	100.0	---	11.1	88.9	---	---	100.0
46. Participating in cardiac arrest team:												
a. Bringing equipment to bedside	71.4	---	28.6	50.0	---	50.0	88.9	---	11.1	66.7	---	33.3
b. Call "444"	71.4	---	28.6	50.0	---	50.0	44.4	33.3	22.2	66.7	---	33.3

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[1] May not add to 100 percent because of rounding.

Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
46. c. Start external cardiac massage	57.1	---	42.9	---	---	100.0	22.2	77.8	---	33.3	33.3	33.3
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	57.1	---	42.9	---	---	100.0	11.1	88.9	---	33.3	33.3	33.3
e. Remove, clean equipment, restock emergency cart afterwards.	71.4	---	28.6	50.0	---	50.0	22.2	77.8	---	---	100.0	---
47. Beginning preparations for patient scheduled for surgery:												
a. Wash operative area	57.1	---	42.9	100.0	---	---	66.7	33.3	---	33.3	33.3	33.3
b. Shave operative area	---	---	100.0	---	---	100.0	11.1	77.1	11.1	---	---	100.0
c. Instruct patient not to eat or drink	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
d. Remove jewelry, bobby pins, dentures, or other prostheses.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
48. Filling out accident reports.	71.4	---	28.6	50.0	---	50.0	---	100.0	---	33.3	66.7	---
49. Filling out:												
a. Stamping lab slips and requisitions	85.7	14.3	---	100.0	---	---	44.4	55.6	---	66.7	33.3	---
b. Making necessary arrangements for X-ray, lab work.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	33.3	66.7	---
50. Checking and posting orders in MD order books.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	33.3	66.7	---
51. Checking off diet manual each shift.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	66.7	33.3	---

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[1] May not add to 100 percent because of rounding.

Table No.5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
52. a. Recommending (or)	28.6	42.9	28.6	---	50.0	50.0	11.1	88.9	---	---	100.0	---
b. **Arranging for a consultation with medical specialists, social service, psychiatry, etc.**	14.3	57.1	28.6	---	50.0	50.0	---	100.0	---	---	100.0	---
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	85.7	14.3	---	100.0	---	---	---	100.0	---	---	100.0	---
54. Evaluating quality of nursing care.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	---	100.0	---
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	---	100.0	---
56. Regularly inspecting rooms and wards for cleanliness and comfort.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	---	100.0	---
57. Accompanying physicians on rounds.	57.1	14.3	28.6	100.0	---	---	---	88.9	11.1	---	100.0	---
58. Investigating and adjusting complaints.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	---	100.0	---
59. Supervising preparation and maintenance of patients' clinical records.	85.7	14.3	---	100.0	---	---	11.1	88.9	---	---	100.0	---
60. Giving change-of-shift report.	85.7	14.3	---	100.0	---	---	22.2	77.8	---	33.3	66.7	---

Table No. 5 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Surgical Unit Performing Each Function [1]

FUNCTIONS	R. N.			L.P.N.			N.A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
61. Teaching.	71.4	14.3	14.3	50.0	----	50.0	88.9	11.1	----	66.7	----	33.3
62. Research.	----	----	100.0	----	----	100.0	----	88.9	11.1	----	----	100.0
63, Supervisory duties.	85.7	14.3	----	100.0	----	----	----	100.0	----	----	100.0	----
64. Waiting for work.	71.4	28.6	----	100.0	----	----	44.4	55.6	----	66.7	33.3	----

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[1] May not add to 100 percent because of rounding.

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
1. Straightening up and cleaning: patients' immediate furniture, nurses station, utility rooms, treatment rooms, nourishment center and litters.	100.0	7.9	100.0	5.5	100.0	6.3	100.0	3.0
2. Distributing mail and flowers.	----	----	50.0	0.5	77.8	0.9	----	----
3. Doing departmental errands: going to orthopedic department, Central Supply, laundry, IBM or records office, or operating room to help bring back a patient.	57.1	0.5	100.0	0.5	100.0	1.3	100.0	1.3
4. Doing errands for patients: making phone calls, refilling water jugs, preparing snacks or drinks from nourishment station, getting an extra pillow.	100.0	2.6	100.0	1.8	100.0	4.7	100.0	8.0
5. Giving and removing bedpans, assisting patient to use bedpan or urinal, helping patient to and from bathroom.	100.0	4.1	100.0	8.0	100.0	6.9	100.0	6.3

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
6. **Making beds: unoccupied, occupied, post-operative. (Time is given with function No. 20.)**	100.0		100.0		100.0		100.0	
7. Answering patient calls.	100.0	1.6	100.0	0.5	100.0	0.5	100.0	2.2
8. Admitting patient: completing clothes list or valuables list, getting patient settled in bed, notifying intern.	100.0	1.2	100.0	1.8	100.0	2.4	100.0	2.2
9. Discharging patient: returning clothes and valuables, accompanying patient from floor.	57.1	0.5	100.0	0.5	77.8	3.0	33.3	3.0
10. Locating and setting up simple equipment: bed rails, footboards, sandbags, heel coverlets.	100.0	0.9	100.0	1.8	100.0	0.5	66.7	1.8
11. Taking patient to X-ray; taking lab specimens to lab.	57.1	1.3	100.0	1.8	100.0	2.4	100.0	2.2
12. Assisting in moving patient to another floor.	57.1	0.5	100.0	0.5	88.9	0.5	100.0	1.3

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

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FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
13. Measuring food and fluid intake and output and totaling: urine jugs, tube drainage and IV intake, at the end of each shift.	100.0	57.1	100.0	55.5	100.0	46.1	100.0	3.0
14. Checking, delivering and picking up food trays; feeding patients.	71.4	5.3	50.0 100.0	0.5 8.0	77.8 88.9	0.9 11.8	33.3	13.0
15. Putting away supplies, instruments and equipment.	100.0	0.9	100.0	0.5	66.7	2.2	100.0	2.2
16. Washing or soaking used equipment and supplies, putting them on the cart to be returned to Central Supply.	57.1 85.7	0.5 0.8	100.0 100.0	0.5 5.5	100.0 100.0	1.3 1.6	100.0 100.0	1.3 2.2
17. Caring for deceased persons.	85.7	0.5 2.6	100.0 100.0	0.5 1.8	88.9 100.0	0.9 4.7	100.0 100.0	1.3 8.0
18. Giving information or directions to patients or visitors, taking them to the [illegible]	100.0	1.9 4.1	100.0 100.0	1.8 8.0	100.0 100.0	0.5 6.9	100.0 100.0	0.5 6.3

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Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Funtions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
19. Collecting urine, stool, or sputum specimens to be sent to lab; performing routine tests; obtaining a culture.	100.0	3.0	100.0	5.5	100.0	4.4	100.0	6.3
20. Giving routine morning care.	85.7	19.0	100.0	24.0	100.0	25.9	100.0	9.5
21. Preparing patients for bed at night.	14.3	8.0	----	----	----	----	----	----
22. Assisting patients with walkers, wheelchairs, crutches and braces.	85.7	1.5	100.0	1.8	100.0	1.3	100.0	1.3
23. Lifting patients on and off litters.	100.0	1.6	100.0	1.8	100.0	1.4	100.0	1.3
24. Taking and recording: temperature, pulse, respiration rate, blood pressure and weight.	100.0	2.6	100.0	5.5	100.0	11.0	100.0	6.3
25. Assisting patient with Sitz bath.	71.4	0.5	100.0	0.5	66.7	0.9	33.3	0.5

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
26. Applying or changing: ace bandages, elastic stockings, binders, slings, restraints, ice bags, hot water bottles.	100.0	3.7	100.0	3.0	100.0	3.0	100.0	1.3
27. Giving cleansing treatments: enemas, douches.	100.0	1.6	100.0	1.8	100.0	1.4	100.0	3.0
28. Caring for wounds: dressing, irrigating, changing dressings.	100.0	13.8	100.0	8.0	44.4	0.5	33.3	0.5
29. Feeding patient by tube.	85.7	2.0	50.0	3.0	44.4	0.5	100.0	0.5
30. Caring for precaution or reverse precaution patients.	100.0	0.5	100.0	0.5	100.0	0.5	33.3	0.5
31. Setting up suture sets, assisting doctor in removing sutures.	57.1	3.0	100.0	0.5	88.9	0.5	66.7	0.5
32. Doing cervical smears; venereal disease smears.	14.3	0.5	----	----	33.3	0.5	33.3	0.5
33. Assisting doctor in wart removal; skin biopsies.	14.3	0.5	50.0	0.5	----	----	----	----

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
34. Washing and dressing lacerations.	14.3	0.5	----	----	----	----	66.7	0.5
35. Using EKG equipment.	100.0	0.5	100.0	0.5	77.8	0.5	100.0	0.5
36. Drawing blood.	42.9	0.5	----	----	----	----	----	----
37. Ordering drugs from pharmacy; receiving and putting away drugs.	85.7	2.6	100.0	1.8	----	----	----	----
38. Administering specified medication; noting time and amounts on patients' charts.	100.0	13.3	100.0	10.5	33.3	0.5	66.7	0.5
39. Performing functions related to oxygen masks and catheters.	100.0	1.9	100.0	0.5	88.9	0.8	100.0	1.9
41. Performing functions relating to IV's.	100.0	6.0	100.0	8.0	100.0	2.4	100.0	7.0
42. Assisting physicians during treatment and examination of patients.	85.7	3.4	100.0	1.8	88.9	3.0	100.0	1.3

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
43. Counting narcotics and barbiturates at the change of each shift.	100.0	1.6	100.0	1.8	----	----	33.3	0.5
44. Observing and reporting to supervisor or physician on patient's condition, reaction to drugs, treatments, IV's, significant incidents.	100.0	0.9	100.0	0.5	100.0	0.5	100.0	0.5
45. Serving emotional support to patients; entertaining patients (particularly children).	100.0	0.5	100.0	0.5	88.9	0.5	100.0	0.5
46. Participating in cardiac arrest team.	71.4	0.5	50.0	0.5	88.9	0.5	66.7	4.3
47. Beginning preparations for patient scheduled for surgery.	100.0	2.2	100.0	0.5	100.0	1.1	100.0	1.8
48. Filling out accident reports.	71.4	0.5	50.0	0.5	----	----	33.3	0.5

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
49. **Stamping lab slips and requisitions; making necessary arrangements for X-rays and lab work.**	85.7	3.5	100.0	3.0	44.4	1.1	66.7	0.5
50. **Checking and posting orders in MD order books.**	85.7	6.0	100.0	4.3	11.1	0.5	33.3	0.5
51. **Checking off diet manual manual each shift.**	85.7	2.4	100.0	0.5	11.1	0.5	66.7	0.5
52. **Recommending or arranging for a consultation with** medical specialists, social service, psychiatry, etc.	42.9	0.5	----	----	11.1	0.5	----	----
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	85.7	1.3	100.0	1.8	----	----	----	----
54. Evaluating quality of nursing care.	85.7	0.5	100.0	0.5	11.1	0.5	----	----

Table No. 6 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the SURGICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	85.7	0.5	100.0	0.5	11.1	0.5	----	----
56. Regularly inspecting rooms and wards for cleanliness and comfort.	85.7	2.4	100.0	0.5	11.1	0.5	----	----
57. Accompanying physicians on rounds. Time given with number 42.	57.1		100.0		----	----	----	----
58. Investigating and adjusting complaints.	85.7	0.5	100.0	0.5	11.1	0.5	----	----
59. Supervising preparation and maintenance of patients clinical records.	85.7	0.5	100.0	0.5	11.1	0.5	----	----
60. Giving change-of-shift report.	85.7	2.4	100.0	3.0	22.2	0.5	33.3	0.5
61. Teaching.	71.4	3.0	50.0	0.5	88.9	0.5	66.7	0.5
62. Research.	----	----	----	----	----	----	----	----
63. Supervisory duties.	85.7	0.5	100.0	3.5	----	----	----	----
64. Waiting for work.	71.4	1.5	100.0	0.5	44.4	1.0	66.7	11.5

Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
1. Straightening up and cleaning the following:												
a. Patients' immediate furniture	85.7	14.3	---	100.0	---	---	90.0	10.0	---	100.0	---	---
b. Nurses station	100.0	---	---	100.0	---	---	20.0	80.0	---	75.0	25.0	---
c. Utility rooms	100.0	---	---	50.0	50.0	---	90.0	10.0	---	100.0	---	---
d. Treatment Rooms	85.7	14.3	---	50.0	50.0	---	90.0	10.0	---	75.0	25.0	---
e. Nourishment center	57.1	42.9	---	75.0	25.0	---	80.0	20.0	---	75.0	25.0	---
f. Litters.	14.3	57.1	28.6	25.0	50.0	25.0	30.0	70.0	---	75.0	25.0	---
2. Distributing mail and flowers.	28.6	42.9	28.6	50.0	50.0	---	80.0	20.0	---	25.0	25.0	50.0
3. Doing departmental errands:												
a. Going to pick up orthopedic equipment	28.6	71.4	---	---	100.0	---	50.0	50.0	---	50.0	25.0	25.0
b. Going to Central Supply or laundry	57.1	42.9	---	25.0	75.0	---	80.0	20.0	---	100.0	---	---
c. Going to IBM or records office	14.3	85.7	---	25.0	75.0	---	100.0	---	---	75.0	25.0	---
d. Going to the operating room to help bring back a patient.	14.3	85.7	---	---	50.0	50.0	30.0	60.0	10.0	50.0	25.0	25.0
4. Doing errands for patients:												
a. Making phone calls	57.1	28.6	14.3	75.0	25.0	---	70.0	30.0	---	---	100.0	---
b. Refilling water jugs	100.0	---	---	75.0	25.0	---	100.0	---	---	100.0	---	---
c. Preparing snacks or drinks from nourishment station	71.4	28.6	---	50.0	50.0	---	100.0	---	---	100.0	---	---
d. Getting an extra pillow.	100.0	---	---	100.0	---	---	90.0	---	10.0	100.0	---	---
5. a. Giving and removing bedpans	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
5. b. Assisting patient to use bedpan or urinal	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Helping patient to and from bathroom.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
6. Making beds:												
a. Unoccupied	71.4	---	28.6	100.0	---	---	100.0	---	---	25.0	---	75.0
b. Occupied	85.7	14.3	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Post-operative.	57.1	14.3	28.6	---	---	100.0	70.0	---	30.0	---	---	100.0
7. Answering patient calls.	100.0	---	---	75.0	25.0	---	100.0	---	---	100.0	---	---
8. Admitting patient:												
a. Completing clothes list or valuables list	57.1	42.9	---	75.0	25.0	---	100.0	---	---	100.0	---	---
b. Getting patient comfortably settled in bed	85.7	14.3	---	75.0	25.0	---	100.0	---	---	100.0	---	---
c. Notifying intern.	85.7	---	14.3	75.0	25.0	---	---	100.0	---	25.0	75.0	---
9. Discharging patient:												
a. Returning clothes and valuables	28.6	42.9	28.6	75.0	25.0	---	100.0	---	---	50.0	---	50.0
b. Accompanying patient from floor.	28.6	42.9	28.6	50.0	50.0	---	100.0	---	---	50.0	---	50.0
10. Locating and setting up simple equipment:												
a. Bed rails	---	100.0	---	75.0	25.0	---	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
10. b. Footboards	71.4	14.3	14.3	75.0	25.0	---	70.0	---	30.0	100.0	---	---
c. Sandbags	57.1	14.3	28.6	75.0	25.0	---	60.0	10.0	30.0	75.0	---	25.0
d. Heel coverlets.	85.7	14.3	---	100.0	---	---	90.0	---	10.0	75.0	---	25.0
11. Taking patient												
a. to X-ray: walking with him, by wheelchair, by litter	42.9	57.1	---	50.0	50.0	---	100.0	---	---	100.0	---	---
b. Taking lab specimens to lab.	57.1	42.9	---	50.0	50.0	---	100.0	---	---	100.0	---	---
12. Assisting in moving patient to another floor.	85.7	14.3	---	100.0	---	---	80.0	---	20.0	100.0	---	---
13. Measuring food and fluid intake and output and totaling:												
a. urine jugs	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. tube drainage	100.0	---	---	75.0	25.0	---	80.0	10.0	10.0	100.0	---	---
c. IV intake at the end of each shift.	100.0	---	---	100.0	---	---	90.0	10.0	---	50.0	50.0	---
14. a. Checking food trays	71.4	---	28.6	100.0	---	---	100.0	---	---	50.0	---	50.0
b. Delivering food trays	71.4	---	28.6	100.0	---	---	100.0	---	---	75.0	---	25.0
c. Picking up food trays	71.4	---	28.6	100.0	---	---	100.0	---	---	75.0	---	25.0
d. Feeding patients.	71.4	---	28.6	100.0	---	---	100.0	---	---	75.0	---	25.0
15. Putting away the following:												
a. Supplies	85.7	14.3	---	75.0	25.0	---	80.0	20.0	---	100.0	---	---
b. Equipment	85.7	14.3	---	75.0	25.0	---	80.0	20.0	---	100.0	---	---
c. Instruments.	100.0	---	---	75.0	25.0	---	70.0	30.0	---	100.0	---	---

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Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
16. a. Washing or soaking used equipment and supplies	85.7	14.3	---	75.0	25.0	---	90.0	10.0	---	100.0	---	---
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	28.6	71.4	---	100.0	---	---	80.0	20.0	---	100.0	---	---
17. Caring for deceased persons:												
a. Notifying appropriate persons;	100.0	---	---	75.0	25.0	---	---	100.0	---	25.0	75.0	---
b. Washing and tying patient;	71.4	28.6	---	100.0	---	---	80.0	---	20.0	100.0	---	---
c. Removing IV's, tubes, dressings;	100.0	---	---	100.0	---	---	80.0	---	20.0	75.0	25.0	---
d. Going to morgue to get litter;	71.4	28.6	---	50.0	50.0	---	80.0	---	20.0	100.0	---	---
e. Taking deceased person to morgue.	71.4	28.6	---	75.0	25.0	---	80.0	---	20.0	100.0	---	---
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
19. a. Collecting urine, stool, or sputum specimens to be sent to lab;	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Performing routine tests: pre-meal glucose, Guiac, Albumen, Ph, Hematocrits.	71.4	28.6	---	100.0	---	---	100.0	---	---	100.0	---	---

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Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
19. c. Obtaining a culture.	85.7	---	14.3	100.0	---	---	20.0	80.0	---	25.0	75.0	---
20. Giving routine morning care:												
a. Assisting patient in bathing and dressing, brushing teeth	71.4	---	28.6	100.0	---	---	90.0	10.0	---	25.0	---	75.0
b. Turning or positioning patient	100.0	---	---	100.0	---	---	90.0	---	10.0	75.0	----	25.0
c. Giving massages or alcohol rubs	85.7	14.3	---	100.0	---	---	90.0	---	10.0	75.0	---	25.0
d. Walking with patients	71.4	---	28.6	100.0	---	---	90.0	---	10.0	75.0	---	25.0
e. Getting patients in and out of bed	71.4	---	28.6	100.0	---	---	90.0	---	10.0	75.0	---	25.0
f. Assisting with range of motion or other exercises	71.4	---	28.6	100.0	---	---	70.0	20.0	10.0	50.0	---	50.0
g. Caring for bed sores with tincture of benzoine.	100.0	---	---	100.0	---	---	90.0	---	10.0	75.0	---	25.0
21. Preparing patients for bed at night:												
a. Changing or straightening linen	---	---	100.0	---	---	100.0	10.0	---	90.0	25.0	---	75.0
b. Turning or positioning patient	---	---	100.0	---	---	100.0	10.0	---	90.0	25.0	---	75.0
c. Assisting patient in washing and brushing teeth	---	---	100.0	---	---	100.0	10.0	---	90.0	25.0	---	75.0
d. Giving massages.	---	---	100.0	---	---	100.0	10.0	---	90.0	25.0	---	75.0

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Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
22. Assisting patients with the following:												
a. Walkers	71.4	---	28.6	75.0	---	25.0	90.0	10.0	---	100.0	---	---
b. Wheelchairs	71.4	---	28.6	75.0	---	25.0	100.0	---	---	100.0	---	---
c. Crutches	42.9	28.6	28.6	50.0	25.0	25.0	50.0	50.0	---	75.0	25.0	---
d. Braces	28.6	28.6	42.9	25.0	---	75.0	20.0	70.0	10.0	50.0	25.0	25.0
e. Artificial limbs.	28.6	28.6	42.9	25.0	---	75.0	20.0	70.0	10.0	50.0	25.0	25.0
23. Lifting patients on and off the litters.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
24. Taking and recording:												
a. Temperature	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Pulse	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Respiration rate	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
d. Blood pressure	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
e. Weight.	85.8	14.3	---	100.0	---	---	100.0	---	---	25.0	---	75.0
25. Assisting patient with Sitz bath.	57.1	42.9	---	75.0	---	25.0	40.0	20.0	40.0	50.0	25.0	25.0
26. Applying or changing:												
a. Ice bags	100.0	---	---	100.0	---	---	100.0	---	---	75.0	---	25.0
b. Hot water bottles	100.0	---	---	100.0	---	---	100.0	---	---	75.0	---	25.0
c. Ace bandages	71.4	---	28.6	100.0	---	---	80.0	20.0	---	75.0	25.0	---
d. Elastic stockings	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
e. Binders	71.4	---	28.6	75.0	---	25.0	90.0	10.0	---	25.0	75.0	---
f. Slings	42.9	---	57.1	75.0	---	25.0	70.0	30.0	---	75.0	25.0	---
g. Restraints.	100.0	---	---	100.0	---	---	90.0	10.0	---	100.0	---	---

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Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
27. Giving cleansing treatments:												
a. Enemas	85.7	---	14.3	100.0	---	---	80.0	20.0	---	75.0	---	25.0
b. Douches.	42.9	----	57.1	50.0	---	50.0	20.0	80.0	---	25.0	75.0	---
28. Caring for wounds:												
a. Dressing wounds	100.0	---	---	100.0	---	---	20.0	80.0	---	---	100.0	---
b. Irrigating wounds	100.0	---	---	100.0	---	---	20.0	80.0	---	---	100.0	---
c. Changing dressings.	100.0	---	---	100.0	---	---	40.0	60.0	---	50.0	50.0	---
29. Feeding patient by tube.	100.0	---	---	50.0	---	50.0	40.0	60.0	---	50.0	50.0	---
30. Caring for precaution or reverse precaution patients.	71.4	---	28.6	100.0	---	---	100.0	---	----	100.0	---	---
31. a. Setting up suture sets;	42.9	14.3	42.9	25.0	---	75.0	30.0	60.0	10.0	25.0	---	75.0
b. Assisting doctor in removing sutures.	28.6	14.3	57.1	25.0	---	75.0	20.0	70.0	10.0	25.0	---	75.0
32. a. Doing cervical smears	57.1	---	42.9	---	25.0	75.0	40.0	60.0	---	---	25.0	75.0
b. Venereal disease smears.	---	14.3	85.7	---	25.0	75.0	20.0	80.0	---	---	25.0	75.0
33. Assisting doctor in dermatology problems:												
a. Wart removal	---	---	100.0	25.0	---	75.0	---	50.0	50.0	---	---	100.0
b. Skin biopsies.	---	---	100.0	25.0	---	75.0	---	50.0	50.0	---	---	100.0
34. Caring for lacerations:												
a. Wash laceration	---	---	100.0	----	---	100.0	---	20.0	80.0	---	25.0	75.0
b. Dress laceration.	---	---	100.0	---	---	100.0	---	20.0	80.0	---	25.0	75.0

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Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
35. Using EKG equipment:												
a. Bringing equipment to bedside	100.0	---	---	75.0	---	25.0	70.0	20.0	10.0	100.0	---	---
b. Setting up equipment	100.0	---	---	75.0	---	25.0	20.0	80.0	---	75.0	25.0	---
c. Attaching electrodes to patient	85.7	14.3	---	75.0	---	25.0	20.0	80.0	---	50.0	50.0	---
d. Operating EKG equipment.	28.6	71.4	---	25.0	75.0	---	---	100.0	---	---	100.0	---
36. Drawing blood.	---	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---
37. a. Ordering drugs from pharmacy	71.4	28.6	---	100.0	---	---	---	100.0	---	---	100.0	---
b. Receiving drugs	71.4	14.3	14.3	100.0	---	---	---	100.0	---	---	100.0	---
c. Putting drugs away.	71.4	14.3	14.3	100.0	---	---	---	100.0	---	---	100.0	---
38. a. Administering specified medication	100.0	---	---	100.0	---	---	10.0	90.0	---	50.0	50.0	---
b. Noting time and amounts on patients' charts.	100.0	---	---	100.0	---	---	---	100.0	---	---	100.0	---
39. Performing functions related to oxygen masks, catheters:	100.0	---	---	75.0	25.0	---						
a. Bringing equipment to bedside Oxygen masks							60.0	40.0	---	75.0	25.0	---
Catheters							60.0	40.0	---	75.0	25.0	---
b. Assembling Oxygen masks							20.0	80.0	---	75.0	25.0	---
Catheters							20.0	80.0	---	50.0	50.0	---
c. Inserting or applying Oxygen masks							20.0	80.0	---	50.0	50.0	---
Catheters							10.0	90.0	---	25.0	75.0	---

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Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
39. d. Adjusting or caring for equipment Oxygen masks							60.0	40.0	---	75.0	25.0	---
Catheters							30.0	70.0	---	50.0	50.0	---
e. Removing. Oxygen masks							50.0	50.0	---	75.0	25.0	---
Catheters							50.0	50.0	---	50.0	50.0	---
41. Performing functions relating to IV's:												
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	60.0	40.0	---	100.0	---	---
b. Assembling	100.0	---	---	100.0	---	---	30.0	70.0	---	75.0	25.0	---
c. Inserting needle, starting IV, hanging bottles	---	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---
d. Changing labeled bottles	100.0	---	---	100.0	---	---	60.0	40.0	---	50.0	50.0	---
e. Discontinuing IV service.	100.0	---	---	100.0	---	---	30.0	70.0	---	25.0	75.0	---
42. Assisting physicians during treatment and examination of patients:												
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	80.0	20.0	---	100.0	---	---
b. Preparing equipment or patient, assembling equipment	100.0	---	---	100.0	---	---	70.0	30.0	---	100.0	---	---
c. Holding or restraining patient as necessary	100.0	---	---	100.0	---	---	80.0	10.0	10.0	100.0	---	---
d. Removing and cleaning equipment afterwards.	85.7	14.3	---	100.0	---	---	80.0	20.0	---	100.0	---	---
43. Counting narcotics and barbiturates at the change of each shift.	100.0	---	---	100.0	---	---	---	100.0	---	---	100.0	---

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[1] May not add to 100 percent

Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
44. Observing and reporting to supervisor or physician:												
a. Patient's condition	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Patients reaction to drugs, treatments, IV's	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
c. Significant incidents.	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
45. a. Serving emotional support to patients	100.0	---	---	100.0	---	---	100.0	---	---	100.0	---	---
b. Entertaining patients (particularly children).	---	---	100.0	---	---	100.0	---	---	100.0	25.0	---	75.0
46. Participating in cardiac arrest team:												
a. Bringing equipment to bedside	100.0	---	---	75.0	---	25.0	70.0	20.0	10.0	75.0	---	25.0
b. Call "444"	85.7	---	14.3	75.0	---	25.0	30.0	60.0	10.0	75.0	---	25.0
c. Start external cardiac massage	57.1	---	42.9	75.0	---	25.0	---	100.0	---	75.0	---	25.0
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	71.4	---	28.6	75.0	---	25.0	---	100.0	---	75.0	---	25.0
e. Remove, clean equipment, restock emergency cart afterwards.	100.0	---	---	75.0	---	25.0	10.0	90.0	---	25.0	75.0	---
47. Beginning preparations for patient scheduled for surgery:												

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Table No.7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
47. a. Wash operative area	28.6	---	71.4	---	---	100.0	10.0	30.0	60.0	---	---	100.0
b. Shave operative area	14.3	---	85.7	---	---	100.0	---	40.0	60.0	---	---	100.0
c. Instruct patient not to eat or drink	42.9	---	57.1	50.0	---	50.0	20.0	20.0	60.0	25.0	---	75.0
d. Remove jewelry, bobby pins, dentures, or other prostheses.	42.9	---	57.1	50.0	---	50.0	20.0	20.0	60.0	25.0	---	75.0
48. Filling out accident reports.	14.3	---	85.7	75.0	---	25.0	---	80.0	20.0	25.0	75.0	---
49. Filling out:												
a. Stamping lab slips and requisitions	85.7	14.3	---	100.0	---	---	40.0	60.0	---	50.0	50.0	---
b. Making necessary arrangements for X-rays, lab work.	57.1	28.6	14.3	75.0	25.0	---	---	100.0	---	25.0	75.0	---
50. Checking and posting orders in MD order books.	85.7	14.3	---	100.0	---	---	---	100.0	---	25.0	75.0	---
51. Checking off diet manual each shift.	85.7	14.3	---	100.0	---	---	---	100.0	---	25.0	75.0	---
52. a. Recommending (or)	14.3	57.1	28.6	50.0	50.0	---	10.0	90.0	---	---	100.0	---
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	---	85.7	14.3	---	100.0	---	---	100.0	---	---	100.0	---
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	71.4	28.6	---	100.0	---	---	---	100.0	---	---	100.0	---

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[1] May not add to 100 percent

Table No. 7 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the Medical Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
54. Evaluating quality of nursing care.	42.9	57.1	---	100.0	---	---	---	100.0	---	25.0	75.0	---
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	57.1	42.9	---	100.0	---	---	---	100.0	---	---	100.0	---
56. Regularly inspecting rooms and wards for cleanliness and comfort.	42.9	57.1	---	100.0	---	---	---	100.0	---	---	100.0	---
57. Accompanying physicians on rounds.	57.1	14.3	28.6	100.0	---	---	---	100.0	---	---	100.0	---
58. Investigating and adjusting complaints.	71.4	28.6	---	100.0	---	---	---	100.0	---	---	100.0	---
59. Supervising preparation and maintenance of patients' clinical records.	57.1	42.9	---	75.0	25.0	---	---	100.0	---	---	100.0	---
60. Giving change-of-shift report.	71.4	28.6	---	100.0	---	---	---	100.0	---	25.0	75.0	---
61. Teaching.	71.4	14.3	14.3	75.0	25.0	---	60.0	40.0	---	25.0	75.0	---
62. Research.	---	---	100.0	---	---	100.0	---	100.0	---	---	---	100.0
63. Supervisory duties.	71.4	28.6	---	100.0	---	---	---	100.0	---	---	100.0	---
64. Waiting for work.	57.1	42.9	---	---	100.0	---	60.0	40.0	---	50.0	50.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
1. Staightening up and cleaning patients' immediate furniture, nurses station, utility rooms, treatment rooms, nourishment center and litters.	100.0	6.6	100.0	4.7	100.0	5.0	100.0	5.5
2. Distributing mail and flowers.	28.6	0.5	50.0	0.5	80.0	1.1	25.0	0.5
3. Doing departmental errands: going to orthopedic department, Central Supply, laundry, IBM or records office, or operating room to help bring back a patient.	57.1	0.5	25.0	0.5	100.0	1.5	100.0	1.8
4. Doing errands for patients: making phone calls, refilling water jugs, preparing snacks or drinks from nourishment station, getting an extra pillow.	100.0	2.6	100.0	2.2	100.0	6.5	100.0	4.3
5. Giving and removing bedpans, assisting patient to use bedpan or urinal, helping patient to and from bathroom.	100.0	8.0	100.0	9.7	100.0	7.5	100.0	1.8

Table No. 8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
6. Making beds: unoccupied occupied, post-operative. (Time is given with function Number 20.)	85.7		100.0		100.0		100.0	
7. Answering patient calls.	100.0	2.3	75.0	0.5	100.0	1.0	100.0	3.0
8. Admitting patient: completing clothes list or valuables list, getting patient settled in bed, notifying intern.	100.0	1.6	75.0	1.8	100.0	3.0	100.0	2.4
9. Discharging patient: returning clothes and valuables, accompanying patient from floor.	28.6	1.8	75.0	1.8	100.0	2.0	50.0	1.8
10. Locating and setting up simple equipment: bed rails, footboards, sandbags, heel coverlets.	85.7	2.2	100.0	1.3	100.0	1.5	100.0	0.5
11. Taking patient to X-ray; taking lab specimens to lab.	71.4	1.5	50.0	0.5	100.0	3.5	100.0	1.1
12. Assisting in moving patient to another floor.	85.7	0.9	100.0	0.5	80.0	0.8	100.0	1.1

Table No. 8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
13. Measuring food and fluid intake and output and totaling: urine jugs, tube drainage and IV intake at the end of each shift.	100.0	5.1	100.0	4.7	100.0	3.8	100.0	3.0
14. Checking, delivering and picking up food trays; feeding patients.	71.4	7.0	100.0	11.3	100.0	1.0	75.0	10.5
15. Putting away supplies, instruments and equipment.	100.0	1.6	75.0	0.5	80.0	2.1	100.0	1.1
16. Washing or soaking used equipment and supplies, putting them on the cart to be returned to Central Supply.	85.7	1.3	100.0	1.3	90.0	2.2	100.0	0.5
17. Caring for deceased persons.	100.0	0.5	100.0	0.5	80.0	0.5	100.0	1.8
18. Giving information or directions to patients or visitors, or directing them to the correct source of information.	100.0	0.7	100.0	0.5	100.0	0.5	100.0	0.5

Table No. 8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Each Time on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
19. Collecting urine, stool, or sputum specimens to be sent to lab; performing routine tests; obtaining a culture.	100.0	5.5	100.0	1.3	100.0	3.8	100.0	3.5
20. Giving routine morning care.	100.0	17.4	100.0	20.0	90.0	25.0	75.0	15.3
21. Preparing patients for bed at night.	----	----	----	----	10.0	35.0	25.0	3.0
22. Assisting patients with walkers, wheelchairs, crutches and braces.	71.4	3.0	75.0	1.8	100.0	2.5	100.0	0.5
23. Lifting patients on and off litters.	100.0	2.3	100.0	2.2	100.0	1.3	100.0	0.5
24. Taking and recording: temperature, pulse, respiration rate, blood pressure and weight.	100.0	4.8	100.0	1.3	100.0	13.6	100.0	5.5
25. Assisting patient with Sitz bath.	57.1	0.5	75.0	0.5	40.0	4.6	50.0	0.5
26. Applying or changing: ice bags, hot water bottles, ace bandages, elastic stockings, binders, slings, restraints.	100.0	4.4	100.0	3.0	100.0	4.3	100.0	1.8

Table No. 8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Perdentage of Total Working Time Spent on Functions
27. Giving cleansing treatments: enemas, douches.	85.7	1.8	100.0	3.8	80.0	1.1	75.0	1.3
28. Caring for wounds: dressing, irrigating, changing dressings.	100.0	5.5	100.0	5.3	40.0	0.5	50.0	0.5
29. Feeding patient by tube.	100.0	1.9	50.0	8.0	40.0	0.5	50.0	0.5
30. Caring for precaution or reverse precaution patients.	71.4	1.0	100.0	0.5	100.0	0.5	100.0	0.5
31. Setting up suture sets, assisting doctor in removing sutures.	42.9	0.5	25.0	3.0	30.0	0.5	25.0	8.0
32. Doing cervical smears; venereal disease smears.	57.1	0.5	----	----	40.0	0.5	----	----
33. Assisting doctor in wart removal; skin biopsies.	----	----	25.0	0.5	----	----	----	----
34. Washing and dressing lacerations.	----	----	----	----	----	----	----	----
35. Using EKG equipment.	100.0	0.5	75.0	0.5	70.0	0.5	100.0	0.5
36. Drawing blood.	----	----	----	----	----	----	----	----

Table No. 8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
37. Ordering drugs from pharmacy; receiving and putting away drugs.	85.7	2.6	100.0	3.8	----	----	----	----
38. Administering specified medication; noting time and amounts on patients' charts.	100.0	17.0	100.0	22.7	10.0	0.5	50.0	0.5
39. Performing functions related to oxygen masks and catheters.	100.0	1.2	75.0	1.3	80.0	0.8	100.0	1.1
41. Performing functions relating to IV's.	100.0	5.1	100.0	4.7	70.0	1.6	100.0	3.6
42. Assisting physicians during treatment and examination of patients.	100.0	4.1	100.0	4.7	80.0	1.0	100.0	3.6
43. Counting narcotics and barbiturates at the change of each shift.	100.0	2.2	100.0	2.2	----	----	----	----

Table No. 8 Percentage of Registered Nurses Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
44. Observing and reporting to supervisor or physician on patient's condition, reaction to drugs, treatments, IV's, significant incidents.	100.0	0.5	100.0	0.5	100.0	0.5	100.0	0.5
45. Serving emotional support to patients; entertaining patients (particularly children).	100.0	0.5	100.0	0.5	100.0	0.5	100.0	0.5
46. Participating in cardiac arrest team.	100.0	0.9	75.0	0.5	70.0	0.5	75.0	3.0
47. Beginning preparations for patient scheduled for surgery.	42.9	0.5	50.0	1.8	20.0	1.8	25.0	0.5
48. Filling out accident reports.	14.3	0.5	75.0	0.5	----	----	25.0	0.5
49. Stamping lab slips and requisitions; making necessary arrangements for X-rays and lab work.	85.7	4.6	100.0	1.3	40.0	0.5	50.0	1.8
50. Checking and posting orders in MD order books.	85.7	5.1	100.0	1.3	----	----	25.0	3.0
51. Checking off diet manual each shift.	85.7	1.3	100.0	0.5	----	----	25.0	3.0

Table No. 8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
52. Recommending or arranging for a consultation with medical specialists, social service, psychiatry, etc.	14.3	0.5	50.0	0.5	10.0	0.5	----	----
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	71.4	0.5	100.0	0.5	----	----	----	----
Evaluating quality of nursing care.	42.9	0.5	100.0	0.5	----	----	----	----
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	57.1	2.2	100.0	0.5	----	----	25.0	0.5
56. Regularly inspecting rooms and wards for cleanliness and comfort.	42.9	0.5	100.0	0.5	----	----	----	----
57. Accompanying physicians on rounds.	57.1	8.8	100.0	0.5	----	----	----	----
58. Investigating and adjusting complaints.	71.4	0.5	100.0	0.5	----	----	----	----
59. Supervising preparation and maintenance of patients' clinical records.	57.1	0.5	75.0	0.5	----	----	----	----

Table No.8 Percentage of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies in the MEDICAL UNIT Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		NURSES' AIDE		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
60. Giving change-of-shift report.	71.4	5.5	100.0	1.1	----	----	25.0	3.0
61. Teaching.	71.4	1.8	75.0	0.5	60.0	0.5	25.0	0.5
62. Research.	----	----	----	----	----	----	----	----
63. Supervisory duties.	71.4	14.3	100.0	0.5	----	----	----	----
64. Waiting for work.	57.1	2.4	----	----	60.0	5.1	50.0	10.5

Table No. 9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
1. Straightening up and cleaning the following:									
a. Patients' immediate furniture	100.0	---	---	100.0	---	---	100.0	----	---
b. Nurses' station	66.7	33.3	---	100.0	---	---	33.3	66.7	---
c. Utility rooms	66.7	33.3	---	100.0	---	---	100.0	---	---
d. Treatment rooms	66.7	33.3	---	100.0	---	---	100.0	---	---
e. Nourishment center	100.0	---	---	100.0	---	---	100.0	---	---
f. Litters.	66.7	33.3	---	---	---	100.0	---	66.7	33.3
2. Distributing mail and flowers.	33.3	33.3	33.3	---	100.0	---	66.7	---	33.3
3. Doing departmental errands:									
a. Going to pick up orthopedic equipment	---	66.7	33.3	---	100.0	---	---	100.0	---
b. Going to Central Supply or laundry	---	100.0	---	---	100.0	---	66.7	33.3	---
c. Going to IBM or records office	---	100.0	---	---	100.0	---	66.7	33.3	---
d. Going to the operating room to help bring back a patient.	---	100.0	---	---	100.0	---	66.7	33.3	---
4. Doing errands for patients:									
a. Making phone calls	66.7	---	33.3	---	---	100.0	---	66.7	33.3
b. Refilling water jugs	---	---	100.0	---	---	100.0	33.3	33.3	33.3
c. Preparing snacks or drinks from nourishment station	100.0	---	---	100.0	---	---	100.0	---	---
d. Getting an extra pillow.	33.3	33.3	33.3	100.0	---	---	100.0	---	---
5. a. Giving and removing bedpans	100.0	---	---	100.0	---	---	100.0	---	---
b. Assisting patient to use bedpan or urinal	100.0	---	---	100.0	---	---	100.0	---	---
c. Helping patient to and from bathroom.	100.0	---	---	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No.9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is
6. Making beds:									
a. Unoccupied	100.0	---	---	100.0	---	---	100.0	---	---
b. Occupied	100.0	---	---	100.0	---	---	100.0	---	---
c. Post-operative.	100.0	---	---	100.0	---	---	100.0	---	---
7. Answering patient calls.	100.0	---	---	100.0	---	---	33.3	---	66.7
8. Admitting patients:									
a. Completing clothes list or valuables list	33.3	---	66.7	100.0	---	---	66.7	---	33.
b. Getting patient comfortably settled in bed	100.0	---	---	100.0	---	---	100.0	---	---
c. Notifying intern.	100.0	---	---	100.0	---	---	66.7	33.3	---
9. Discharging patient:									
a. Returning clothes and valuables	33.3	---	66.7	100.0	---	---	33.3	---	66.
b. Accompanying patient from floor.	66.7	33.3	---	100.0	---	---	66.7	---	33.
10. Locating and setting up simple equipment:									
a. Bed rails	---	---	---	100.0	---	---	100.0	---	---
b. Footboards	---	---	100.0	100.0	---	---	100.0	---	---
c. Sandbags	66.7	---	33.3	100.0	---	---	66.7	---	33.
d. Heel coverlets.	33.3	---	66.7	---	100.0	---	66.7	---	33.
11. Taking patient									
a. to X-ray	33.3	66.7	---	100.0	---	---	66.7	33.3	---
b. Taking lab specimens to lab.	33.3	66.7	---	100.0	---	---	66.7	33.3	---
12. Assisting in moving patient to another floor.	33.3	33.3	33.3	---	---	100.0	66.7	33.3	---

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[1] May not add to 100 percent because of rounding.

Table No.9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
3. Measuring food and fluid intake and output and totaling:									
a. Urine jugs	100.0	---	---	100.0	---	---	66.7	33.3	---
b. Tube drainage	100.0	---	---	100.0	---	---	66.7	33.3	---
c. IV intake	100.0	---	---	100.0	---	---	66.7	33.3	---
at the end of each shift.									
4. a. Checking food trays	100.0	---	---	100.0	---	---	100.0	---	---
b. Delivering food trays	100.0	---	---	100.0	---	---	100.0	---	---
c. Picking up food trays	100.0	---	---	100.0	---	---	100.0	---	---
d. Feeding patients.	100.0	---	---	100.0	---	---	100.0	---	---
5. Putting away the following:									
a. Supplies	66.7	---	33.3	100.0	---	---	66.7	33.3	---
b. Equipment	66.7	---	33.3	100.0	---	---	66.7	33.3	---
c. Instruments.	66.7	---	33.3	100.0	---	---	66.7	33.3	---
6. a. Washing or soaking used equipment and supplies	100.0	---	---	100.0	---	---	66.7	33.3	---
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	33.3	33.3	33.3	100.0	---	---	66.7	33.3	---
17. Caring for deceased persons:									
a. Notifying appropriate persons;	66.7	---	33.3	---	---	100.0	33.3	66.7	---
b. Washing and tying patient;	66.7	---	33.3	---	---	100.0	100.0	---	---
c. Removing IV's, tubes, dressings;	66.7	---	33.3	---	---	100.0	100.0	---	---
d. Going to morgue to get litter;	33.3	33.3	33.3	---	---	100.0	100.0	---	---
e. Taking deceased person to morgue.	66.7	---	33.3	---	---	100.0	100.0	---	---
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	100.0	---	---	100.0	---	---	66.7	33.3	---

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[1] May not add to 100 percent because of rounding.

Table No. 9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
19. a. Collecting urine, stool or sputum specimens to be sent to lab;	100.0	---	---	100.0	---	---	100.0	---	---
b. Performing routine tests: pre-meal glucose, guiac, albumen, Ph, hematocrits	100.0	---	---	100.0	---	---	66.7	---	33.3
c. Obtaining a culture.	66.7	---	33.3	---	100.0	---	33.3	66.7	---
20. Giving routine morning care:									
a. Assisting patient in bathing and dressing, brushing teeth	66.7	---	33.3	100.0	---	---	66.7	---	33.3
b. Turning or positioning patient	66.7	---	33.3	100.0	---	---	100.0	---	---
c. Giving massages or alcohol rubs	33.3	---	66.7	100.0	---	---	66.7	---	33.3
d. Walking with patients	66.7	---	33.3	100.0	---	---	100.0	---	---
e. Getting patients in and out of bed	66.7	---	33.3	100.0	---	---	100.0	---	---
f. Assisting with range of motion or other exercises	66.7	---	33.3	---	---	100.0	---	---	100.0
g. Caring for bed sores with tincture of benzoine.	---	---	100.0	---	100.0	---	---	---	100.0
21. Preparing patients for bed at night:									
a. Changing or straightening linen	33.3	---	66.7	---	---	100.0	---	---	100.0
b. Turning or positioning patient	---	---	100.0	---	---	100.0	---	---	100.0
c. Assisting patient in washing and brushing teeth	33.3	---	66.7	---	---	100.0	---	---	100.0
d. Giving massages.	---	---	100.0	---	---	100.0	---	---	100.0
22. Assisting patients with the following:									
a. Walkers	33.3	---	66.7	---	---	100.0	33.3	---	66.7
b. Wheelchairs	100.0	---	---	---	---	100.0	66.7	---	33.3

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[1] May not add to 100 percent because of rounding.

Table No. 9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
2. c. Crutches	100.0	---	---	100.0	---	---	33.3	---	66.7
d. Braces	---	---	100.0	---	---	100.0	---	33.3	66.7
e. Artificial limbs.	---	---	100.0	---	---	100.0	---	33.3	66.7
3. Lifting patients on and off litters.	100.0	---	---	100.0	---	---	33.3	33.3	33.3
4. Taking and recording:									
a. Temperature	100.0	---	---	100.0	---	---	100.0	---	---
b. Pulse	100.0	---	---	100.0	---	---	100.0	---	---
c. Respiration rate	100.0	---	---	100.0	---	---	100.0	---	---
d. Blood pressure	100.0	---	---	100.0	---	---	100.0	---	---
e. Weight.	100.0	---	---	100.0	---	---	100.0	---	---
5. Assisting patient with Sitz bath.	33.3	---	66.7	---	---	100.0	33.3	---	66.7
6. A pplying or changing:									
a. Ice bags	100.0	---	---	100.0	---	---	100.0	---	---
b. Hot water bottles	100.0	---	---	100.0	---	---	66.7	---	33.3
c. Ace bandages	100.0	---	---	100.0	---	---	100.0	---	---
d. Elastic stockings	---	---	100.0	---	---	100.0	---	---	100.0
e. Binders	---	---	100.0	---	---	100.0	33.3	---	66.7
f. Slings	100.0	---	---	100.0	---	---	100.0	---	---
g. Restraints.	100.0	---	---	100.0	---	---	100.0	---	---
7. Giving cleansing treatments:									
a. Enemas	100.0	---	---	---	---	100.0	100.0	---	---
b. Douches.	---	---	100.0	---	---	100.0	---	---	100.0
8. Caring for wounds:									
a. Dressing wounds	100.0	---	---	100.0	---	---	---	100.0	---
b. Irrigating wounds	100.0	---	---	100.0	---	---	66.7	33.3	---
c. Changing dressings.	100.0	---	---	100.0	---	---	100.0	---	---
9. Feeding patient by tube.	---	---	100.0	---	---	100.0	33.3	---	66.7
0. Caring for precaution or reverse precaution patients.	100.0	---	---	100.0	---	---	66.7	---	33.3

May not add to 100 percent because of rounding.

Table No. 9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
31. a. Setting up suture sets;	66.7	---	33.3	100.0	---	---	66.7	33.3	---
b. Assisting doctor in removing sutures.	66.7	---	33.3	100.0	---	---	66.7	33.3	---
32. a. Doing cervical smears	---	---	100.0	---	---	100.0	---	33.3	66.7
b. Venereal disease smears.	---	---	100.0	---	---	100.0	---	33.3	66.7
33. Assisting doctor in dermatology problems:									
a. Wart removal	---	---	100.0	---	---	100.0	---	33.3	66.7
b. Skin biopsies.	---	---	100.0	---	---	100.0	---	33.3	66.7
34. Caring for lacerations:									
a. Wash laceration	---	---	100.0	---	---	100.0	---	---	100.0
b. Dress laceration.	---	---	100.0	---	---	100.0	---	---	100.0
35. Using EKG equipment:									
a. Bringing equipment to bedside	100.0	---	---	---	---	100.0	33.3	66.7	---
b. Setting up equipment	66.7	33.3	---	---	---	100.0	33.3	66.7	---
c. Attaching electrodes to patient	66.7	33.3	---	---	---	100.0	---	100.0	---
d. Operating EKG equipment.	---	100.0	---	---	---	100.0	---	100.0	---
36. Drawing blood.	33.3	66.7	---	---	100.0	---	---	100.0	---
37. a. Ordering drugs from pharmacy	100.0	---	---	100.0	---	---	---	100.0	---
b. Receiving drugs	100.0	---	---	100.0	---	---	---	100.0	---
c. Putting drugs away.	100.0	---	---	100.0	---	---	---	100.0	---
38. a. Administering specified medication	100.0	---	---	100.0	---	---	---	100.0	---
b. Noting time and amounts on patients' charts.	100.0	---	---	100.0	---	---	---	100.0	---
39. Performing functions related to oxygen masks and catheters.	100.0	---	---	---	100.0	---	66.7	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
41. Performing functions relating to IV's:									
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	100.0	---	---
b. Assembling	100.0	---	---	100.0	---	---	66.7	33.3	---
c. Inserting needle, starting IV, hanging bottles	---	100.0	---	---	100.0	---	---	100.0	---
d. Changing labeled bottles	100.0	---	---	100.0	---	---	33.3	66.7	---
e. Discontinuing IV service.	100.0	---	---	100.0	---	---	33.3	66.7	---
42. Assisting physicians during treatment and examination of patients:									
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	100.0	---	---
b. Preparing equipment or patient, assembling equipment	100.0	---	---	100.0	---	---	66.7	33.3	---
c. Holding or restraining patient as necessary	100.0	---	---	100.0	---	---	100.0	---	---
d. Removing and cleaning equipment afterwards.	100.0	---	---	100.0	---	---	100.0	---	---
43. Counting narcotics and barbiturates at the change of each shift.	100.0	---	---	100.0	---	---	---	100.0	---
44. Observing and reporting to supervisor or physician:									
a. Patient's condition	100.0	---	---	100.0	---	---	100.0	---	---
b. Patient's reaction to drugs, treatments, IV's	100.0	---	---	100.0	---	---	100.0	---	---
c. Significant incidents.	100.0	---	---	100.0	---	---	100.0	---	---
45. a. Serving emotional support to patients	100.0	---	---	100.0	---	---	100.0	---	---
b. Entertaining patients (particularly children).	100.0	---	---	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
46. Participating in cardiac arrest team:									
a. Bringing equipment to bedside	33.3	---	66.7	---	---	100.0	33.3	---	66.7
b. Call "444"	33.3	---	66.7	---	---	100.0	---	33.3	66.7
c. Start external cardiac massage	---	---	100.0	---	---	100.0	---	66.7	33.3
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	---	---	100.0	---	---	100.0	---	66.7	33.3
e. Remove, clean equipment, restock emergency cart afterwards.	33.3	---	66.7	---	---	100.0	---	66.7	33.3
47. Beginning preparations for patient scheduled for surgery:									
a. Wash operative area	33.3	---	66.7	100.0	---	---	100.0	---	---
b. Shave operative area	---	---	100.0	---	100.0	---	---	66.7	33.3
c. Instruct patient not to eat or drink	66.7	---	33.3	100.0	---	---	100.0	---	---
d. Remove jewelry, bobby pins, dentures, or other prostheses.	66.7	---	33.3	100.0	---	---	100.0	---	---
48. Filling out accident reports.	66.7	---	33.3	---	---	100.0	---	66.7	33.3
49. Filling out:									
a. stamping lab slips and requisitions	100.0	---	---	100.0	---	---	100.0	---	---
b. making necessary arrangements for X-ray, lab work.	100.0	---	---	100.0	---	---	66.7	33.3	---
50. Checking and posting orders in MD order books.	100.0	---	---	100.0	---	---	33.3	66.7	---
51. Checking off diet manual each shift.	66.7	33.3	---	100.0	---	---	---	100.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
52. a. Recommending (or)	33.3	33.3	33.3	100.0	---	---	---	100.0	---
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	33.3	33.3	33.3	100.0	---	---	---	100.0	---
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	100.0	---	---	100.0	---	---	---	100.0	---
54. Evaluating quality of nursing care.	33.3	33.3	33.3	100.0	---	---	---	100.0	---
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	100.0	---	---	100.0	---	---	---	100.0	---
56. Regularly inspecting rooms and wards for cleanliness and comfort.	100.0	---	---	100.0	---	---	33.3	66.7	---
57. Accompanying physicians on rounds.	66.7	33.3	---	100.0	---	---	---	100.0	---
58. Investigating and adjusting complaints.	66.7	---	33.3	100.0	---	---	---	100.0	---
59. Supervising preparation and maintenance of patients' clinical records.	100.0	---	---	100.0	---	---	---	100.0	---
60. Giving change-of-shift report.	100.0	---	---	100.0	---	---	33.3	66.7	---
61. Teaching.	66.7	---	33.3	---	100.0	---	66.7	33.3	---

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[1] May not add to 100 percent because of rounding.

Table No.9 Percentage of Registered Nurses, Licensed Practical Nurses, and Nurses' Aides in the Pediatrics Unit Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is
62. Research.	---	---	100.0	---	---	100.0	---	100.0	---
63. Supervisory duties.	100.0	---	---	---	---	100.0	---	100.0	---
64. Waiting for work.	100.0	---	---	---	100.0	---	33.3	66.7	---
69. Preparing babies or children for afternoon naps, including:									
a. Bathe them	66.7	---	33.3	100.0	---	---	100.0	---	---
b. Change diapers	66.7	---	33.3	100.0	---	---	100.0	---	---
c. Giving them bottle, if applicable.	66.7	---	33.3	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
1. Staightening up and cleaning: patients' immediate furniture, nurses station, utility rooms, treatment rooms, nourishment center and litters.	100.0	7.2	100.0	13.0	100.0	8.0
2. Distributing mail and flowers.	33.3	0.5	----	----	66.7	0.5
3. Doing departmental errands: going to orthopedic department, Central Supply, laundry, IBM or records office, or operating room to help bring back a patient.	----	----	----	----	66.7	1.8
4. Doing errands for patients: making phone calls, refilling water jugs, preparing snacks or drinks from nourishment station, getting an extra pillow.	100.0	3.0	100.0	8.0	100.0	5.5
5. Giving and removing bedpans, assisting patient to use bedpan or urinal, helping patient to and from bathroom.	100.0	9.7	100.0	3.0	100.0	9.7
6. Making beds: unoccupied, occupied, post-operative. (Time given with function number 20.)	100.0		100.0		100.0	

Table No. 10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
7. Answering patient calls.	100.0	1.2	100.0	0.5	33.3	0.5
8. Admitting patient: completing clothes list or valuables list, getting patient settled in bed, notifying intern.	100.0	3.0	100.0	3.0	100.0	3.0
9. Discharging patient: returning clothes and valuables, accompanying patient from floor.	100.0	0.5	100.0	0.5	66.7	3.0
10. Locating and setting up simple equipment: bed rails, footboards, sandbags, heel coverlets.	66.7	0.5	100.0	0.5	100.0	0.5
11. Taking patient to X-ray; taking lab specimens to lab.	33.3	8.0	100.0	8.0	66.7	8.0
12. Assisting in moving patient to another floor.	33.3	0.5	----	----	66.7	0.5
13. Measuring food and fluid intake and output and totaling: urine jugs, tube drainage and IV intake, at the end of each shift.	100.0	2.2	100.0	3.0	66.7	8.0

Table No. 10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
14. Checking, delivering and picking up food trays; feeding patients.	100.0	20.3	100.0	20.0	100.0	22.7
15. Putting away supplies, instruments and equipment.	66.7	0.5	100.0	3.0	66.7	1.8
16. Washing or soaking used equipment and supplies, putting them on the cart to be returned to Central Supply.	100.0	1.3	100.0	3.0	66.7	0.5
17. Caring for deceased persons.	66.7	0.5	----	----	100.0	0.5
18. Giving information or directions to patients or visitors, or directing them to the correct source of information.	100.0	1.3	100.0	0.5	66.7	0.5
19. Collecting urine, stool, or sputum specimens to be sent to lab; performing routine tests; obtaining a culture.	100.0	0.5	100.0	0.5	100.0	2.2
20. Giving routine morning care.	66.7	27.5	100.0	20.0	100.0	20.0
21. Preparing patients for bed at night.	33.3	3.0	----	----	----	----

Table No. 10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
22. Assisting patients with walkers, wheelchairs, crutches and braces.	100.0	1.8	100.0	0.5	66.7	0.5
23. Lifting patients on and off litters.	100.0	0.5	100.0	0.5	33.3	0.5
24. Taking and recording: temperature, pulse, respiration rate, blood pressure and weight.	100.0	8.0	100.0	3.0	100.0	6.3
25. Assisting patient with Sitz bath.	33.3	0.5	----	----	33.3	0.5
26. Applying or changing: ice bags, hot water bottles, ace bandages, elastic stockings, binders, slings, restraints.	100.0	2.2	100.0	0.5	100.0	0.5
27. Giving cleansing treatments: enemas, douches.	100.0	0.5	----	----	100.0	0.5
28. Caring for wounds: dressing, irrigating, changing dressings.	100.0	5.8	100.0	3.0	100.0	1.3
29. Feeding patient by tube.	----	----	----	----	33.3	0.5
30. Caring for precaution or reverse precaution patients.	100.0	2.2	100.0	0.5	66.7	1.8
31. Setting up suture sets, assisting doctor in removing sutures.	66.7	0.5	100.0	0.5	66.7	1.8

Table No. 10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
32. Doing cervical smears; venereal disease smears.	----	----	----	----	----	----
33. Assisting doctor in wart removal; skin biopsies.	----	----	----	----	----	----
34. Washing and dressing lacerations.	----	----	----	----	----	----
35. Using EKG equipment.	100.0	0.5	----	----	33.3	0.5
36. Drawing blood.	33.3	0.5	----	----	----	----
37. Ordering drugs from pharmacy; receiving and putting away drugs.	100.0	3.8	100.0	0.5	----	----
38. Administering specified medication; noting time and amounts on patients' charts.	100.0	6.3	100.0	3.0	----	----
39. Performing functions related to oxygen masks and catheters.	100.0	2.2	----	----	66.7	1.8
41. Performing functions relating to IV's.	100.0	4.7	100.0	3.0	100.0	2.2
42. Assisting physicians during treatment and examination of patients.	100.0	6.3	100.0	8.0	100.0	2.2

Table No. 10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
43. Counting narcotics and barbiturates at the change of each shift.	100.0	1.3	100.0	3.0	----	----
44. Observing and reporting to supervisor or physician on patient's condition, reaction to drugs, treatments, IV's, significant incidents.	100.0	1.3	100.0	0.5	100.0	0.5
45. Serving emotional support to patients; entertaining patients (particularly children).	100.0	0.5	100.0	0.5	100.0	1.3
46. Participating in cardiac arrest team.	33.3	0.5	----	----	33.3	0.5
47. Beginning preparations for patient scheduled for surgery.	66.7	1.8	100.0	0.5	100.0	0.5
48. Filling out accident reports.	66.7	0.5	----	----	----	----
49. Stamping lab slips and requisitions, making necessary arrangements for X-rays and lab work.	100.0	3.8	100.0	3.0	100.0	1.3
50. Checking and posting orders in MD order books.	100.0	3.0	100.0	3.0	33.3	8.0
51. Checking off diet manual each shift.	66.7	1.8	100.0	3.0	----	----

Table No.10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions.	Percentage of Total Working Time Spent on Functions
52. Recommending or arranging for a consultation with medical specialists, social services, psychiatry, etc.	33.3	0.5	100.0	0.5	----	----
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	100.0	0.5	100.0	0.5	----	----
54. Evaluating quality of nursing care.	33.3	0.5	100.0	0.5	----	----
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	100.0	2.2	100.0	0.5	----	----
56. Regularly inspecting rooms and wards for cleanliness and comfort.	100.0	2.2	100.0	0.5	33.3	3.0
57. Accompanying physicians on rounds.	66.7	0.5	100.0	0.5	----	----
58. Investigating and adjusting complaints.	66.7	0.5	100.0	0.5	----	----
59. Supervising preparation and maintenance of patients' clinical records.	100.0	0.5	100.0	3.0	----	----
60. Giving change-of-shift report.	100.0	8.0	100.0	3.0	33.3	3.0
61. Teaching.	66.7	0.5	----	----	66.7	0.5
62. Research.	----	----	----	----	----	----

Table No. 10 Percentage of Registered Nurses, Licensed Practical Nurses and Nurses' Aides in the Pediatrics Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		L.P.N.		AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
63. Supervisory duties.	100.0	0.5	----	----	----	----
64. Waiting for work.	100.0	4.3	----	----	----	----
65. Caring for a mother in labor.	----	----	----	----	33.3	3.0
66. Assisting in delivery room.	----	----	----	----	----	----
67. Caring for newborn.	----	----	----	----	----	----
68. Caring for mother after delivery.	----	----	----	----	----	----
69. Preparing babies or children for afternoon naps, including, bathing, diapering, giving bottle if applicable.	66.7	5.5	100.0	3.0	100.0	3.0

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function[1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.
1. Straightening up and cleaning the following:						
a. Patients' immediate furniture	100.0	----	----	100.0	----	----
b. Nurses' station	66.7	33.3	----	75.0	25.0	-----
c. Utility rooms	100.0	----	----	100.0	----	----
d. Treatment rooms	100.0	----	----	75.0	25.0	----
e. Nourishment center	66.7	33.3	----	50.0	25.0	25.0
f. Litters.	66.7	33.3	----	75.0	25.0	----
2. Distributing mail and flowers.	----	----	100.0	50.0	25.0	25.0
3. Doing departmental errands:						
a. Going to pick up orthopedic equipment	----	100.0	---	----	----	100.0
b. Going to Central Supply or laundry	----	100.0	----	50.0	25.0	25.0
c. Going to IBM or records office	----	100.0	----	75.0	25.0	----
d. Going to the operating room to help bring back a patient.	----	100.0	----	75.0	25.0	----
4. Doing errands for patients:						
a. Making phone calls	33.3	33.3	33.3	25.0	50.0	25.0
b. Refilling water jugs	66.7	33.3	----	75.0	----	25.0
c. Preparing snacks or drinks from nourishment station	66.7	33.3	----	75.0	----	25.0
d. Getting an extra pillow.	100.0	----	----	75.0	----	25.0
5. a. Giving and removing bedpans	100.0	----	----	100.0	----	----
b. Assisting patient to use bedpan or urinal	100.0	----	----	100.0	----	----
c. Helping patient to and from the bathroom.	100.0	----	----	100.0	----	----
6. Making beds:						
a. Unoccupied	33.3	33.3	33.3	100.0	----	----
b. Occupied	66.7	33.3	----	75.0	----	25.0
c. Post-operative.	66.7	33.3	----	75.0	----	25.0
7. Answering patient calls.	100.0	----	----	75.0	----	25.0

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[1] May not add to 100 percent because of rounding.

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function [1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.
8. Admitting patient:						
a. Completing clothes list or valuables list	100.0	----	----	100.0	----	----
b. Getting patient comfortably settled in bed	100.0	----	----	100.0	----	----
c. Notifying intern.	100.0	----	----	50.0	50.0	----
9. Discharging patient:						
a. Returning clothes and valuables	----	----	100.0	75.0	----	25.0
b. Accompanying patient from floor.	----	----	100.0	75.0	----	25.0
10. Locating and setting up simple equipment:						
a. Bed rails	----	----	----	100.0	----	----
b. Footboards	33.3	----	66.7	25.0	----	75.0
c. Sandbags	----	----	100.0	----	----	100.0
d. Heel coverlets.	----	----	100.0	----	----	100.0
11. Taking patient						
a. to X-ray	----	100.0	----	75.0	25.0	----
b. Taking lab specimens to lab.	----	100.0	----	75.0	25.0	----
12. Assisting in moving patient to another floor.	66.7	33.3	----	75.0	----	25.0
13. Measuring food and fluid intake and output and totaling:						
a. Urine jugs	66.7	----	33.3	75.0	----	25.0
b. Tube drainage	33.3	----	66.7	75.0	----	25.0
c. IV intake at the end of each shift.	100.0	----	----	75.0	----	25.0
14. a. Checking food trays	33.3	----	66.7	75.0	----	25.0
b. Delivering food trays	33.3	----	66.7	75.0	----	25.0
c. Picking up food trays	33.3	----	66.7	75.0	----	25.0
d. Feeding patients.	----	----	100.0	50.0	----	50.0
15. Putting away the following:						
a. Supplies	66.7	33.3	----	100.0	----	----
b. Equipment	66.7	33.3	----	100.0	----	----
c. Instuments.	66.7	33.3	----	100.0	----	----

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1. May not add to 100 percent because of rounding.

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function[1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.
16. a. Washing or soaking used equipment and supplies	66.7	33.3	----	100.0	----	----
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	66.7	33.3	----	100.0	----	----
17. Caring for deceased persons:						
a. Notifying appropriate persons;	33.3	----	66.7	----	50.0	50.0
b. Washing and tying patient;	33.3	----	66.7	----	----	100.0
c. Removing IV's, tubes, dressings;	33.3	----	66.7	----	----	100.0
d. Going to morgue to get litter;	----	33.3	66.7	----	----	100.0
e. Taking deceased person to morgue.	----	33.3	66.7	---	----	100.0
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	100.0	----	----	100.0	----	----
19. a. Collecting urine, stool or sputum specimens to be sent to lab	100.0	----	----	100.0	----	----
b. Performing routine tests: pre-meal glucose, guiac, albumen, Ph, hematocrits	33.3	33.3	33.3	50.0	----	50.0
c. Obtaining a culture.	----	----	100.0	25.0	50.0	25.0
20. Giving routine morning care:						
a. Assisting patient in bathing and dressing, brushing teeth	33.3	----	66.7	75.0	----	25.0
b. Turning or positioning patient	66.7	----	33.3	75.0	----	25.0
c. Giving massages or alcohol rubs	66.7	----	33.3	75.0	----	25.0
d. Walking with patients	66.7	----	33.3	75.0	----	25.0
e. Getting patients in and out of bed	66.7	----	33.3	75.0	----	25.0

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1. May not add to 100 percent because of rounding

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function [1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.
20. f. Assisting with range of motion or other exercises	----	----	100.0	25.0	25.0	50.0
g. Caring for bed sores with tincture of benzoine.	----	----	100.0	25.0	----	75.0
21. Preparing patient for bed at night:						
a. Changing or straightening linen	33.3	----	66.7	----	----	100.0
b. Turning or positioning patient	33.3	----	66.7	----	----	100.0
c. Assisting patient in washing and brushing teeth	33,3	----	66.7	----	----	100.0
d. Giving massages.	33.3	----	66.7	----	----	100.0
22. Assisting patients with the following:						
a. Walkers	----	----	100.0	----	----	100.0
b. Wheelchairs	----	----	100.0	75.0	----	25.0
c. Crutches	----	----	100.0	----	----	100.0
d. Braces	----	----	100.0	----	----	100.0
e. Artificial limbs.	----	----	100.0	----	----	100.0
23. Lifting patients on and off litters.	100.0	----	----	100.0	----	----
24. Taking and recording:						
a. Temperature	100.0	----	----	100.0	----	----
b. Pulse	100.0	----	----	100.0	----	----
c. Respiration rate	100.0	----	----	100.0	----	----
d. Blood pressure	100.0	----	----	100.0	----	----
e. Weight.	100.0	----	----	75.0	----	25.0
25. Assisting patient with Sitz bath.	----	----	100.0	25.0	----	75.0
26. Applying or changing:						
a. Ice bags	66.7	----	33.3	75.0	----	25.0
b. Hot water bottles	66.7	----	33.3	50.0	----	50.0
c. Ace bandages	66.7	----	33.3	25.0	----	75.0
d. Elastic stockings	100.0	----	----	100.0	----	----
e. Binders	66.7	----	33.3	75.0	----	25.0
f. Slings	----	----	100.0	----	----	100.0

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1. May not add to 100 percent because of rounding.

able No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function [1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Function is Not Appl.
g. Restraints.	33.3	----	66.7	----	----	100.0
7. Giving cleansing treatments:						
a. Enemas	100.0	----	----	100.0	----	----
b. Douches.	66.7	----	33.3	50.0	25.0	25.0
8. Caring for wounds:						
a. Dressing wounds	33.3	----	66.7	----	50.0	50.0
b. Irrigating wounds	33.3	----	66.7	----	50.0	50.0
c. Changing dressings.	33.3	----	66.7	25.0	50.0	25.0
9. Feeding patient by tube.	----	----	100.0	----	50.0	50.0
0. Caring for precaution or reverse precaution patients.	----	----	100.0	----	25.0	75.0
1. a. Setting up suture sets	----	----	100.0	50.0	25.0	25.0
b. Assisting doctor in removing sutures.	----	----	100.0	25.0	50.0	25.0
2. a. Doing cervical smears	33.3	----	66.7	75.0	25.0	----
b. Venereal disease smears.	----	----	100.0	----	25.0	75.0
3. Assisting doctor in dermatology problems:						
a. Wart removal	----	----	100.0	----	----	100.0
b. Skin biopsies.	----	----	100.0	----	----	100.0
4. Caring for lacerations:						
a. Wash laceration	----	----	100.0	25.0	----	75.0
b. Dress laceration.	----	----	100.0	25.0	----	75.0
5. Using EKG equipment:						
a. Bringing equipment to bedside	33.3	----	66.7	----	75.0	25.0
b. Setting up equipment	----	33.3	66.7	----	75.0	25.0
c. Attaching electrodes to patient	----	33.3	66.7	----	75.0	25.0
d. Operating EKG equipment.	----	33.3	66.7	----	100.0	----
6. Drawing blood.	----	100.0	----	----	100.0	----

. May not add to 100 percent because of rounding.

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function[1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.
37. a. Ordering drugs from pharmacy	100.0	----	----	----	100.0	----
b. Receiving drugs	66.7	----	33.3	----	100.0	----
c. Putting drugs away.	100.0	----	----	----	100.0	----
38. a. Administering specified medication	100.0	----	----	----	100.0	----
b. Noting time and amounts on patients' charts.	100.0	----	----	----	100.0	----
39. Performing functions related to oxygen masks and catheters.	100.0	----	----	50.0	50.0	----
41. Performing functions relating to IV's:						
a. Bringing equipment to bedside	100.0	----	----	75.0	25.0	----
b. Assembling	100.0	----	----	75.0	25.0	----
c. Inserting needle, starting IV, hanging bottles	----	66.7	33.3	----	100.0	----
d. Changing labeled bottles	100.0	----	----	75.0	25.0	----
e. Discontinuing IV service.	100.0	----	----	75.0	25.0	----
42. Assisting physicians during treatment and examination of patients:						
a. Bringing equipment to bedside	100.0	----	----	75.0	25.0	----
b. Preparing equipment or patient, assembling equipment	100.0	----	----	75.0	25.0	----
c. Holding or restraining patient as necessary	100.0	----	----	75.0	25.0	----
d. Removing and cleaning equipment afterwards.	100.0	----	----	100.0	----	----
43. Counting narcotics and barbiturates at the change of each shift.	100.0	----	----	----	100.0	----
44. Observing and reporting to supervisor or physician:						
a. Patient's condition	100.0	----	----	100.0	----	----
b. Patient's reaction to drugs, treatments, IV's	100.0	----	----	100.0	----	----
c. Significant incidents.	100.0	----	----	100.0	----	----

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[1] May not add to 100 percent because of rounding.

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function[1]

	R.N.			N.A.		
FUNCTIONS	% Performing Function	% Not Performing Function	% Where Funct.is Not Appl.	% Performing Function	% Not Performing Function	% Where Function is Not Appl.
45. a. Serving emotional support to patients	100.0	----	----	100.0	----	----
b. Entertaining patients (particularly children).	----	----	100.0	----	----	100.0
46. Participating in cardiac arrest team:						
a. Bringing equipment to bedside	33.3	----	66.7	----	----	100.0
b. Call "444"	----	----	100.0	----	----	100.0
c. Start external cardiac massage	----	----	100.0	----	50.0	50.0
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	----	33.3	66.7	----	50.0	50.0
e. Remove, clean equipment, restock emergency cart afterwards.	33.3	----	66.7	----	50.0	50.0
47. Beginning preparations for patient scheduled for surgery:						
a. Wash operative area	66.7	----	33.3	75.0	25.0	----
b. Shave operative area	66.7	----	33.3	50.0	25.0	25.0
c. Instruct patient not to eat or drink	66.7	----	33.3	100.0	----	----
d. Remove jewelry, bobby pins, dentures, or other prostheses.	100.0	----	----	100.0	----	----
48. Filling out accident reports.	----	----	100.0	----	75.0	25.0
49. Filling out:						
a. Stamping lab slips and requisitions	100.0	----	----	75.0	25.0	----
b. Making necessary arrangements for X-rays, lab work.	66.7	----	33.3	50.0	50.0	----
50. Checking and posting orders in MD order books.	100.0	----	----	50.0	50.0	----
51. Checking off diet manual each shift.	66.7	----	33.3	25.0	50.0	25.0

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1. May not add to 100 percent because of rounding.

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function[1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct.is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.
52. a. Recommending (or)	33.3	66.7	----	50.0	----	50.0
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	----	66.7	33.3	----	100.0	----
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	33.3	----	66.7	25.0	75.0	----
54. Evaluating quality of nursing care.	33.3	33.3	33.3	50.0	50.0	----
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	100.0	----	----	50.0	50.0	----
56. Regularly inspecting rooms and wards for cleanliness and comfort.	66.7	----	33.3	50.0	50.0	----
57. Accompanying physicians on rounds.	66.7	----	33.3	25.0	50.0	25.0
58. Investigating and adjusting complaints.	66.7	33.3	----	50.0	50.0	----
59. Supervising preparation and maintenance of patients' clinical records.	66.7	33.3	----	50.0	50.0	----
60. Giving change-of-shift report.	100.0	----	----	50.0	50.0	----
61. Teaching.	66.7	----	33.3	75.0	25.0	----
62. Research.	----	----	100.0	----	100.0	----
63. Supervisory duties.	33.3	----	66.7	25.0	75.0	----
64. Waiting for work.	66.7	33.3	----	100.0	---	----

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1. May not add to 100 percent because of rounding.

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function[1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.
65. Caring for a mother in labor:						
a. Admitting patient	100.0	----	----	25.0	----	75.0
b. Obtaining necessary information from patient	100.0	----	----	25.0	----	75.0
c. Checking vital signs and fetal heart frequently	100.0	----	----	25.0	----	75.0
d. Prepping patient, given enema	100.0	----	----	25.0	----	75.0
e. Providing emotional support.	100.0	----	----	25.0	----	75.0
66. Assisting in delivery room:						
a. Assisting in transferring patient to delivery room, and positioning, securing, and draping patient as necessary on table	100.0	----	----	25.0	----	75.0
b Setting-up delivery room	100.0	----	----	25.0	----	75.0
c. Directly assisting doctor as necessary	100.0	----	----	25.0	----	75.0
d. Receiving baby from doctor, place in heated crib	33.3	66.7	----	25.0	----	75.0
e. Giving suction and oxygen as necessary	100.0	----	----	25.0	----	75.0
f. Putting silver nitrate in eyes of baby	100.0	----	----	----	25.0	75.0
g. Clamping umbilical cord	66.7	33.3	----	25.0	----	75.0
h. Measuring baby, taking footprints	100.0	----	----	25.0	----	75.0
i. Cleaning up both patient and used equipment, instruments afterwards.	100.0	----	----	25.0	----	75.0
67. Caring for newborn:						
a. Moving baby from delivery room to nursery	100.0	----	----	----	100.0	----
b. Washing, diapering	----	----	100.0	50.0	50.0	----
c. Feeding	----	----	100.0	50.0	50.0	----
d. Teaching mother how to breast-feed, bottle-feed, bathe, and generally care for baby.	----	----	100.0	50.0	50.0	----

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1. May not add to 100 percent because of rounding.

Table No. 11 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Department Performing Each Function[1]

FUNCTIONS	R.N.			N.A.		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Appl.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
68. Caring for mother after delivery:						
a. Encouraging mother to get up, take showers, force fluids, etc.	33.3	----	66.7	50.0	50.0	----
b. Checking perineum sutures, breasts, fundus, and flow of patient.	66.7	----	33.3	50.0	50.0	----
69. Preparing babies or children for afternoon naps, including:						
a. Bathe them	----	----	100.0	----	----	100.0
b. Change diapers	----	----	100.0	----	----	100.0
c. Giving them bottle, if applicable.	----	----	100.0	----	----	100.0

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1. May not add to 100 percent because of rounding.

Table No. 12 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		NURSES' AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
1. Straightening up and cleaning: patients' immediate furniture, nurses station, utility rooms, treatment rooms, nourishment center and litters.	100.0	8.0	100.0	5.5
2. Distributing mail and flowers.	----	----	50.0	3.0
3. Doing departmental errands: going to orthopedic department, Central Supply, laundry, IBM or records office, or operating room to help bring back a patient.	----	-----	100.0	0.5
4. Doing errands for patients: making phone calls, refilling water jugs, preparing snacks or drinks from nourishment station, getting an extra pillow.	100.0	2.2	75.0	9.7
5. Giving and removing bedpans, assisting patient to use bedpan or urinal, helping patient to and from bathroom.	100.0	3.0	100.0	5.5
6. Making beds: unoccupied, occupied, post-operative. (Time given with function Number 20.)	66.7		100.0	
7. Answering patient calls.	100.0	0.5	75.0	1.3
8. Admitting patient: completing clothes list or valuables list, getting patient settled in bed, notifying intern.	100.0	3.0	100.0	3.6
9. Discharging patient: returning clothes and valuables, accompanying patient from floor.	-----	----	75.0	6.3

Table No. 12 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		NURSES' AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
10. Locating and setting up simple equipment: bed rails, footboards, sandbags, heel coverlets.	33.3	0.5	100.0	0.5
11. Taking patient to X-ray; taking lab specimens to lab.	----	----	75.0	2.2
12. Assisting in moving patient to another floor.	66.7	1.8	75.0	1.3
13. Measuring food and fluid intake and output and totaling: urine jugs, tube drainage and IV intake, at the end of each shift.	100.0	2.2	75.0	2.2
14. Checking, delivering and picking up food trays; feeding patients.	33.3	8.0	75.0	8.0
15. Putting away supplies, instruments and equipment.	66.7	1.8	100.0	2.4
16. Washing or soaking used equipment and supplies, putting them on the cart to be returned to Central Supply.	66.7	1.8	100.0	3.6
17. Caring for deceased persons.	33.3	0.5	----	----
18. Giving information or directions to patients or visitors, or directing them to the correct source of information.	100.0	1.3	100.0	0.5
19. Collecting urine, stool or sputum specimens to be sent to lab; performing routine tests; obtaining a culture.	100.0	2.2	100.0	4.3
20. Giving routine morning care.	66.7	5.5	75.0	20.0
21. Preparing patients for bed at night.	33.3	3.0	----	----

Table No. 12 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		NURSES' AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
22. Assisting patients with walkers, wheelchairs, crutches and braces.	----	----	75.0	0.5
23. Lifting patients on and off litters.	100.0	1.3	100.0	1.8
24. Taking and recording: temperature, pulse, respiration rate, blood pressure and weight.	100.0	4.7	100.0	6.0
25. Assisting patient with Sitz bath.	----	----	25.0	3.0
26. Applying or changing: ice bags, hot water bottles, ace bandages, elastic stockings, binders, slings, restraints.	100.0	4.7	100.0	3.6
27. Giving cleansing treatments: enemas, douches.	100.0	3.0	100.0	2.4
28. Caring for wounds: dressing, irrigating, changing dressings.	33.3	0.5	25.0	0.5
29. Feeding patient by tube.	----	----	----	----
30. Caring for precaution or reverse precaution patients.	----	----	----	----
31. Setting up suture sets, assisting doctor in removing sutures.	----	----	50.0	0.5
32. Doing cervical smears; venereal disease smears.	33.3	0.5	75.0	0.5
33. Assisting doctor in wart removal; skin biopsies.	----	----	----	----
34. Washing and dressing lacerations.	----	----	25.0	0.5
35. Using EKG equipment.	33.3	0.5	----	----
36. Drawing blood.	----	----	----	----

Table No. 12 **Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions**

FUNCTIONS	R.N.		NURSES' AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
37. Ordering drugs from pharmacy; receiving and putting away drugs.	100.0	1.3	----	----
38. Administering specified medication; noting time and amounts on patients' charts.	100.0	6.3	----	----
39. Performing functions related to oxygen masks and catheters.	100.0	1.8	50.0	0.5
41. Performing functions relating to IV's.	100.0	2.2	75.0	1.3
42. Assisting physicians during treatment and examination of patients.	100.0	2.2	100.0	1.3
43. Counting narcotics and barbiturates at the change of each shift.	100.0	1.3	----	----
44. Observing and reporting to supervisor or physician on patient's condition, reaction to drugs, treatments, IV's, significant incidents.	100.0	4.7	100.0	2.4
45. Serving emotional support to patients; entertaining patients (particularly children).	100.0	1.3	100.0	1.1
46. Participating in cardiac arrest team.	33.3	0.5	----	----
47. Beginning preparations for patient scheduled for surgery.	100.0	2.2	100.0	3.0
48. Filling out accident reports.	----	----	----	----
49. Stamping lab slips and requisitions; making necessary arrangements for X-rays and lab work.	100.0	2.2	75.0	1.8
50. Checking and posting orders in MD order books.	100.0	3.8	50.0	0.5

Table No. 12 Percentage of Registered Nurses and Nurses' Aides in the Labor and Delivery Unit Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		NURSES' AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
51. Checking off diet manual each shift.	66.7	0.5	25.0	0.5
52. Recommending or arranging for a consultation with medical specialists, social service, psychiatry, etc.	33.3	0.5	50.0	0.5
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	33.3	0.5	25.0	0.5
54. Evaluating quality of nursing care.	33.3	0.5	50.0	0.5
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	100.0	3.0	50.0	3.0
56. Regularly inspecting rooms and wards for cleanliness and comfort.	66.7	0.5	50.0	3.0
57. Accompanying physicians on rounds.	66.7	0.5	25.0	0.5
58. Investigating and adjusting complaints.	66.7	0.5	50.0	0.5
59. Supervising preparation and maintenance of patients' clinical records.	66.7	8.0	50.0	1.8
60. Giving change-of-shift report.	100.0	4.7	50.0	0.5
61. Teaching.	66.7	8.0	75.0	3.0
62. Research.	----	----	----	----
63. Supervisory duties.	33.3	3.0	25.0	0.5
64. Waiting for work.	66.7	5.5	100.0	8.0
65. Caring for a mother in labor.	100.0	6.3	25.0	8.0
66. Assisting in delivery room.	100.0	8.0	25.0	3.0
67. Caring for newborn.	100.0	1.3	50.0	15.5
68. Caring for mother after delivery.	66.7	11.5	50.0	4.3

Table No. 13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicabl
1. Straightening up and cleaning the following:						
a. Patients' immediate furniture	33.3	---	66.7	100.0	---	---
b. Nurses' station	100.0	---	---	100.0	---	---
c. Utility rooms	---	---	100.0	---	---	100.0
d. Treatment rooms	100.0	---	---	100.0	---	---
e. Nourishment center	---	---	100.0	---	---	100.0
f. Litters.	33.3	---	66.7	---	---	100.0
2. Distributing mail and flowers.	---	---	100.0	---	---	100.0
3. Doing departmental errands:						
a. Going to pick up orthopedic equipment	---	---	100.0	---	100.0	---
b. Going to Central Supply or laundry	33.3	66.7	---	100.0	---	---
c. Going to IBM or records office	66.7	33.3	---	100.0	---	---
d. Going to the operating room to help bring back a patient.	---	---	100.0	100.0	---	---
4. Doing errands for patients:						
a. Making phone calls	---	---	100.0	100.0	---	---
b. Refilling water jugs	---	---	100.0	---	---	100.0
c. Preparing snacks or drinks from nourishment station	---	---	100.0	---	---	100.0
d. Getting an extra pillow.	---	---	100.0	---	---	100.0
5. a. Giving and removing bedpans	---	---	100.0	100.0	---	---
b. Assisting patient to use bedpan or urinal	---	---	100.0	100.0	---	---
c. Helping patient to and from bathroom.	---	---	100.0	100.0	---	---
6. Making beds:						
a. Unoccupied	66.7	---	33.3	100.0	---	---
b. Occupied	---	---	100.0	100.0	---	---
c. Post-operative.	---	---	100.0	100.0	---	---
7. Answering patient calls.	---	---	100.0	---	---	100.0

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[1] May not add to 100 percent because of rounding.

Table No. 13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
3. Admitting patient:						
a. Completing clothes list or valuables list	---	---	100.0	---	---	100.0
b. Getting patient comfortably settled in bed	---	---	100.0	100.0	---	---
c. Notifying intern.	---	---	100.0	100.0	---	---
9. Discharging patient:						
a. Returning clothes and valuables	---	---	100.0	---	---	100.0
b. Accompanying patient from floor.	---	---	100.0	100.0	---	---
). Locating and setting up simple equipment:						
a. Bed rails	---	---	100.0	---	---	100.0
b. Footboards	---	---	100.0	---	---	100.0
c. Sandbags	---	---	100.0	---	---	100.0
d. Heel coverlets.	---	---	100.0	---	---	100.0
1. Taking patient						
a. to X-ray.	66.7	33.3	---	100.0	---	---
b. Taking lab specimens to lab.	66.7	33.3	---	100.0	---	---
2. Assisting in moving patient to another floor.	---	66.7	33.3	100.0	---	---
3. Measuring food and fluid intake and output and totaling:						
a. Urine jugs	---	---	100.0	---	---	100.0
b. Tube drainage	---	---	100.0	---	---	100.0
c. IV intake	---	---	100.0	---	---	100.0
at the end of each shift.						
4. a. Checking food trays	---	---	100.0	---	---	100.0
b. Delivering food trays	---	---	100.0	---	---	100.0
c. Picking up food trays	---	---	100.0	---	---	100.0
d. Feeding patients.	---	---	100.0	---	---	100.0

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[1] May not add to 100 percent because of rounding.

Table No.13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
15. Putting away the following:						
a. Supplies	100.0	---	---	100.0	---	---
b. Equipment	100.0	---	---	100.0	---	---
c. Instruments.	100.0	---	---	100.0	---	---
16. a. Washing or soaking used equipment and supplies	100.0	---	---	100.0	---	---
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	66.7	33.3	---	100.0	---	---
17. Caring for deceased persons:						
a. Notifying appropriate persons;	---	---	100.0	---	---	100.0
b. Washing and tying patient;	---	---	100.0	---	---	100.0
c. Removing IV's, tubes, dressings;	---	---	100.0	---	---	100.0
d. Going to morgue to get litter;	---	---	100.0	---	---	100.0
e. Taking deceased person to morgue.	---	---	100.0	---	---	100.0
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	100.0	---	---	100.0	---	---
19. a. Collecting urine, stool or sputum specimens to be sent to lab;	100.0	---	---	100.0	---	---
b. Performing routine tests: pre-meal glucose, guiac, albumen, Ph, hematocrits.	100.0	---	---	100.0	---	---
c. Obtaining a culture.	100.0	---	---	100.0	---	---
20. Giving routine morning care:	66.7	---	33.3	---	100.0	---
a. Assisting patient in bathing and dressing, brushing teeth	---	---	100.0	---	---	100.0
b. Turning or positioning patient	---	---	100.0	---	---	100.0
c. Giving massages or alcohol rubs	---	---	100.0	---	---	100.0
d. Walking with patients	---	---	100.0	---	---	100.0

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[1] May not add to 100 percent because of rounding.

Table No. 13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
0. e. Getting patients in and out of bed	---	---	100.0	---	---	100.0
f. Assisting with range of motion or other exercises	---	---	100.0	---	---	100.0
g. Caring for bed sores with tincture of benzoine.	---	---	100.0	---	---	100.0
1. Preparing patients for bed at night:						
a. Changing or straightening linen	---	---	100.0	---	---	100.0
b. Turning or positioning patient	---	---	100.0	---	---	100.0
c. Assisting patient in washing and brushing teeth	---	---	100.0	---	---	100.0
d. Giving massages.	---	---	100.0	---	---	100.0
2. Assisting patients with the following:						
a. Walkers	33.3	---	66.7	---	---	100.0
b. Wheelchairs	66.7	---	33.3	100.0	---	---
c. Crutches	66.7	---	33.3	100.0	---	---
d. Braces	---	---	100.0	---	---	100.0
e. Artificial limbs.	---	---	100.0	---	---	100.0
3. Lifting patients on and off litters.	100.0	---	---	100.0	---	---
4. Taking and recording:						
a. Temperature	100.0	---	---	100.0	---	---
b. Pulse	100.0	---	---	100.0	---	---
c. Respiration rate	100.0	---	---	100.0	---	---
d. Blood pressure	100.0	---	---	100.0	---	---
e. Weight.	100.0	---	---	100.0	---	---
5. Assisting patient with Sitz bath.	---	---	100.0	---	---	100.0
6. Applying or changing:						
a. Ice bags	---	---	100.0	---	---	100.0
b. Hot water bottles	33.3	---	66.7	---	---	100.0
c. Ace bandages	100.0	---	---	100.0	---	---
d. Elastic stockings	100.0	---	---	100.0	---	---
e. Binders	66.7	---	33.3	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No.13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R.N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
26. f. Slings	66.7	---	33.3	100.0	---	---
g. Restraints.	33.3	---	66.7	100.0	---	---
27. Giving cleansing treatments:						
a. Enemas	---	---	100.0	---	---	100.0
b. Douches.	---	---	100.0	---	---	100.0
28. Caring for wounds:						
a. Dressing wounds	100.0	---	---	---	100.0	---
b. Irrigating wounds	100.0	---	---	---	100.0	---
c. Changing dressings.	100.0	---	---	100.0	---	---
29. Feeding patient by tube.	---	---	100.0	---	---	100.0
30. Caring for precaution or reverse precaution patients.	---	---	100.0	---	---	100.0
31. a. Setting up suture sets;	100.0	---	---	100.0	---	---
b. Assisting doctor in removing sutures.	100.0	---	---	100.0	---	---
32. a. Doing cervical smears	100.0	---	---	100.0	---	---
b. Venereal disease smears.	100.0	---	---	---	100.0	---
33. Assisting doctor in dermatology problems:						
a. Wart removal	33.3	66.7	---	100.0	---	---
b. Skin biopsies.	33.3	66.7	---	100.0	---	---
34. Caring for lacerations:						
a. Wash laceration	33.3	---	66.7	---	---	100.0
b. Dress laceration.	33.3	---	66.7	---	---	100.0
35. Using EKG equipment:						
a. Bringing equipment to bedside	33.3	---	66.7	100.0	---	---
b. Setting up equipment	33.3	---	66.7	---	100.0	---
c. Attaching electrodes to patient	33.3	---	66.7	---	100.0	---
d. Operating EKG equipment.	---	33.3	66.7	---	100.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
36. Drawing blood.	33.3	66.7	---	---	100.0	---
37. a. Ordering drugs from pharmacy	100.0	---	---	---	100.0	---
b. Receiving drugs	33.3	66.7	---	---	100.0	---
c. Putting drugs away.	33.3	66.7	---	---	100.0	---
38. a. Administering specified medication	100.0	---	---	---	100.0	---
b. Noting time and amounts on patients' charts.	100.0	---	---	---	100.0	---
39. Performing functions related to oxygen masks, catheters:						
a. Bringing equipment to bedside (O)	---	---	100.0	---	---	100.0
(Cat.)	---	---	100.0	---	---	100.0
b. Assembling (O)	---	---	100.0	---	---	100.0
(Cat.)	---	---	100.0	---	---	100.0
c. Inserting or applying (O)	---	---	100.0	---	---	100.0
(Cat.)	---	---	100.0	---	---	100.0
d. Adjusting or caring for equipment (O)	---	---	100.0	---	---	100.0
(Cat.)	---	---	100.0	---	---	100.0
e. Removing. (O)	---	---	100.0	---	---	100.0
(Cat.)	---	---	100.0	---	---	100.0
41. Performing functions relating to IV's:						
a. Bringing equipment to bedside	---	---	100.0	---	---	100.0
b. Assembling	---	---	100.0	---	---	100.0
c. Inserting needle, starting IV, hanging bottles	---	---	100.0	---	---	100.0
d. Changing labeled bottles	---	---	100.0	---	---	100.0
e. Discontinuing IV service.	---	---	100.0	---	---	100.0
42. Assisting physicians during treatment and examination of patients:						
a. Bringing equipment to bedside	66.7	---	33.3	100.0	---	---
b. Preparing equipment or patient, assembling equipment	66.7	---	33.3	100.0	---	---
c. Holding or restraining patient as necessary	66.7	---	33.3	100.0	---	---
d. Removing and cleaning equipment afterwards.	66.7	---	33.3	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No.13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
43. Counting narcotics and barbiturates at the change of each shift.	---	66.7	33.3	---	---	100.0
44. Observing and reporting to supervisor or physician:						
a. Patient's condition	66.7	---	33.3	100.0	---	---
b. Patient's reaction to drugs, treatments, IV's	66.7	---	33.3	100.0	---	---
c. Significant incidents.	66.7	---	33.3	100.0	---	---
45. a. Serving emotional support to patients	100.0	---	---	100.0	---	---
b. Entertaining patients (particularly children).	66.7	---	33.3	---	---	100.0
46. Participating in cardiac arrest team:						
a. Bringing equipment to bedside	---	---	100.0	---	---	100.0
b. Call "444"	---	---	100.0	---	---	100.0
c. Start external cardiac massage	---	---	100.0	---	---	100.0
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	---	---	100.0	---	---	100.0
e. Remove, clean equipment, restock emergency cart afterwards.	---	---	100.0	---	---	100.0
47. Beginning preparations for patient scheduled for surgery:						
a. Wash operative area	---	---	100.0	---	---	100.0
b. Shave operative area	---	---	100.0	---	---	100.0
c. Instruct patient not to eat or drink	---	---	100.0	---	---	100.0
d. Remove jewelry, bobby pins, dentures, or other prostheses.	---	---	100.0	---	---	100.0
48. Filling out accident reports.	---	---	100.0	---	---	100.0
49. Filling out:						
a. stamping lab slips and requisitions	100.0	---	---	100.0	---	---
b. making necessary arrangements for X-rays, lab work.	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 13 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Function[1]

FUNCTIONS	R. N.			N. A.		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
50. Checking and posting orders in MD order books.	66.7	---	33.3	---	100.0	---
51. Checking off diet manual each shift.	---	---	100.0	---	---	100.0
52. a. Recommending (or)	---	100.0	---	---	100.0	---
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	---	100.0	---	---	100.0	---
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	---	66.7	33.3	---	100.0	---
54. Evaluating quality of nursing care.	33.3	66.7	---	---	100.0	---
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	100.0	---	---	---	100.0	---
56. Regularly inspecting rooms and wards for cleanliness and comfort.	100.0	---	---	100.0	---	---
57. Accompanying physicians on rounds.	100.0	---	---	---	100.0	---
58. Investigating and adjusting complaints.	100.0	---	---	---	100.0	---
59. Supervising preparation and maintenance of patients' clinical records.	100.0	---	---	---	100.0	---
60. Giving change-of-shift report.	---	---	100.0	---	100.0	---
61. Teaching.	100.0	---	---	---	100.0	---
62. Research.	---	---	100.0	---	100.0	---
63. Supervisory duties.	---	100.0	---	---	100.0	---
64. Waiting for work.	100.0	---	---	---	100.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 14 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Group of Functions, and Percentage of Total Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		NURSES' AIDE	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentag of Total Working Time Spen on Functions
1. Straightening up and cleaning: patients' immediate furniture, nurses station, utility rooms, treatment rooms, nourishment center and litters.	100.0	6.3	100.0	8.0
2. Distributing mail and flowers.	----	----	----	----
3. Doing departmental errands: going to orthopedic department, Central Supply, laundry, IBM or records office, or operating room to help bring back a patient.	100.0	0.5	100.0	8.0
4. Doing errands for patients: making phone calls, refilling water jugs, preparing snacks or drinks from nourishment station, getting an extra pillow.	----	----	100.0	0.5
5. Giving and removing bedpans, assisting patient to use bedpan or urinal, helping patient to and from the bathroom.	----	----	100.0	0.5
6. Making beds: unoccupied, occupied, post-operative.	66.7	8.0	100.0	8.0
7. Answering patient calls.	----	----	----	----
8. Admitting patient: completing clothes list or valuables list, getting patient settled in bed, notifying intern.	----	----	100.0	3.0
9. Discharging patient: returning clothes and valuables, accompanying patient from floor.	----	----	100.0	3.0
10. Locating and setting up simple equipment: bed rails, footboards, sandbags, heel coverlets.	----	----	----	----
11. Taking patient to X-ray; taking lab specimens to lab.	100.0	0.5	100.0	8.0

Table No. 14 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		NURSES' AIDE	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
12. Assisting in moving patient to another floor.	----	----	100.0	3.0
13. Measuring food and fluid intake and output and totaling: urine jugs, tube drainage and IV intake, at the end of each shift.	----	----	----	----
14. Checking, delivering and picking up food trays; feeding patients.	----	----	----	----
15. Putting away supplies, instruments and equipment.	100.0	1.3	100.0	3.0
16. Washing or soaking used equipment and supplies, putting them on the cart to be returned to Central Supply.	100.0	2.2	100.0	0.5
17. Caring for deceased persons.	----	----	----	----
18. Giving information or directions to patients or visitors, or directing them to the correct source of information.	100.0	8.0	100.0	8.0
19. Collecting urine, stool, or sputum specimens to be sent to lab; performing routine tests; obtaining a culture.	100.0	6.3	100.0	3.0
20. Giving routine morning care.	----	----	----	----
21. Preparing patients for bed at night.	----	----	----	----
22. Assisting patients with walkers, wheelchairs, crutches and braces.	66.7	0.5	100.0	3.0
23. Lifting patients on and off litters.	100.0	0.5	100.0	3.0
24. Taking and recording: temperature, pulse, respiration rate, blood pressure and weight.	100.0	8.0	100.0	13.0
25. Assisting patient with Sitz bath.	----	----	----	----

Table No. 14 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Group of Functions, and Percentage of Total Workin Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		NURSES' AIDE	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
26. Applying or changing: ice bags, hot water bottles, ace bandages, elastic stockings, binders, slings, restraints.	100.0	6.3	100.0	8.0
27. Giving cleansing treatments: enemas, douches.	----	----	----	----
28. Caring for wounds: dressing, irrigating, changing dressing.	100.0	2.2	100.0	3.0
29. Feeding patient by tube.	----	----	----	----
30. Caring for precaution or reverse precaution patients.	----	----	----	----
31. Setting up suture sets, assisting doctor in removing sutures.	100.0	2.2	100.0	3.0
32. Doing cervical smears; venereal disease smears.	100.0	4.7	100.0	0.5
33. Assisting doctor in wart removal; skin biopsies.	33.3	0.5	100.0	0.5
34. Washing and dressing lacerations.	33.3	3.0	----	----
35. Using EKG equipment.	33.3	0.5	100.0	3.0
36. Drawing blood.	33.3	0.5	----	----
37. Ordering drugs from pharmacy; receiving and putting away drugs.	100.0	0.5	----	----
38. Administering specified medication; noting time and amounts on patients' charts.	100.0	1.3	----	----
39. Performing functions related to oxygen masks and catheters.	----	----	----	----
41. Performing functions relating to IV's.	----	----	----	----

Table No. 14 Percentage of Registered Nurses and Nurses's Aides in the Out-Patient Department Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	R.N.		NURSES' AIDE	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
42. Assisting physicians during treatment and examination of patients.	66.7	14.0	100.0	0.5
43. Counting narcotics and barbiturates at the change of each shift.	----	----	----	----
44. Observing and reporting to supervisor or physician on patient's condition, reaction to drugs, treatments, IV's, significant incidents.	66.7	0.5	100.0	0.5
45. Serving emotional support to patients; entertaining patients (particularly children).	100.0	1.3	100.0	3.0
46. Participating in cardiac arrest team.	----	----	----	----
47. Beginning preparations for patient scheduled for surgery.	----	----	----	----
48. Filling out accident reports.	----	----	----	----
49. Stamping lab slips and requisitions; making necessary arrangements for X-rays and lab work.	100.0	8.8	100.0	0.5
50. Checking and posting orders in MD order books.	66.7	0.5	----	----
51. Checking off diet manual each shift.	----	----	----	----
52. Recommending or arranging for a consultation with medical specialists, social service, psychiatry, etc.	----	----	----	----
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	----	----	----	----
54. Evaluating quality of nursing care.	33.3	0.5	----	----

Table No. 14 Percentage of Registered Nurses and Nurses' Aides in the Out-Patient Department Performing Each Group of Functions, and Percentage of Total Workinc Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		NURSES' AIDE	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	100.0	0.5	----	----
56. Regularly inspecting rooms and wards for cleanliness and comfort.	100.0	0.5	100.0	0.5
57. Accompanying physicians on rounds.	100.0	0.5	----	----
58. Investigating and adjusting complaints.	100.0	0.5	----	----
59. Supervising preparation and maintenance of patients' clinical records.	100.0	0.5	----	----
60. Giving change-of-shift report.	----	----	----	----
61. Teaching.	100.0	5.5	----	----
62. Research.	----	----	----	----
63. Supervisory duties.	----	----	----	----
64. Waiting for work.	66.7	3.0	----	----

Table No. 15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
. Straightening up and cleaning the following:									
a. Patients' immediate furniture	100.0	---	---	100.0	---	---	100.0	---	---
b. Nurses' station	100.0	---	---	100.0	---	---	100.0	---	---
c. Utility rooms	100.0	---	---	100.0	---	---	100.0	---	---
d. Treatment rooms	100.0	---	---	100.0	---	---	100.0	---	---
e. Nourishment center	---	---	100.0	---	---	100.0	---	---	100.0
f. Litters.	100.0	---	---	100.0	---	---	100.0	---	---
. Distributing mail and flowers.	---	---	100.0	---	---	100.0	---	---	100.0
. Doing departmental errands:									
a. Going to pick up orthopedic equipment	100.0	---	---	100.0	---	---	100.0	---	---
b. Going to Cental Supply or laundry	100.0	---	---	100.0	---	---	100.0	---	---
c. Going to IBM or records office	50.0	50.0	---	100.0	---	---	100.0	---	---
d. Going to the operating room to help bring back a patient.	50.0	50.0	---	---	50.0	50.0	100.0	---	---
. Doing errands for patients:									
a. Making phone calls	50.0	50.0	---	100.0	---	---	100.0	---	---
b. Refilling water jugs	---	---	100.0	---	---	100.0	---	---	100.0
c. Preparing snacks or drinks from nourishment station	---	---	100.0	50.0	---	50.0	---	---	100.0
d. Getting an extra pillow.	---	---	100.0	---	---	100.0	---	---	100.0
. a. Giving and removing bedpans	100.0	---	---	100.0	---	---	100.0	---	---
b. Assisting patient to use bedpan or urinal	100.0	---	---	100.0	---	---	100.0	---	---
c. Helping patient to and from bathroom.	100.0	---	---	100.0	---	---	100.0	---	---
. Making beds:									
a. Unoccupied	---	---	100.0	50.0	---	50.0	100.0	---	---
b. Occupied	---	---	100.0	50.0	---	50.0	---	---	100.0
c. Post-operative.	---	---	100.0	---	---	100.0	---	---	100.0

May not add to 100 percent because of rounding.

Table No. 15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
7. Answering patient calls.	50.0	---	50.0	---	---	100.0	100.0	---	---
8. Admitting patient:									
a. Completing clothes list or valuables list	---	---	100.0	100.0	---	---	---	---	100.0
b. Getting patient comfortably settled in bed	---	---	100.0	100.0	---	---	100.0	---	---
c. Notifying intern.	---	---	100.0	100.0	---	---	100.0	---	---
9. Discharging patient:									
a. Returning clothes and valuables	---	---	100.0	100.0	---	---	---	---	100.0
b. Accompanying patient from floor.	---	---	100.0	100.0	---	---	100.0	---	---
10. Locating and setting up simple equipment:									
a. Bed rails	100.0	---	---	100.0	---	---	100.0	---	---
b. Footboards	100.0	---	---	50.0	50.0	---	100.0	---	---
c. Sandbags	100.0	---	---	100.0	---	---	100.0	---	---
d. Heel coverlets.	---	---	100.0	50.0	50.0	---	100.0	---	---
11. Taking patient									
a. to X-ray	100.0	---	---	100.0	---	---	100.0	---	---
b. Taking lab specimens to lab.	100.0	---	---	100.0	---	---	100.0	---	---
12. Assisting in moving patient to another floor.	100.0	---	---	100.0	---	---	100.0	---	---
13. Measuring food and fluid intake and output and totaling:									
a. Urine jugs	---	---	100.0	100.0	---	---	---	---	100.0
b. Tube drainage	---	---	100.0	100.0	---	---	---	---	100.0
c. IV intake at the end of each shift.	---	---	100.0	100.0	---	---	---	---	100.0

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[1] May not add to 100 percent because of rounding.

Table No. 15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
14. a. Checking food trays	---	---	100.0	---	---	100.0	---	---	100.0
b. Delivering food trays	---	---	100.0	---	---	100.0	---	---	100.0
c. Picking up food trays	---	---	100.0	---	---	100.0	---	---	100.0
d. Feeding patients.	---	---	100.0	---	---	100.0	---	---	100.0
15. Putting away the following:									
a. Supplies	100.0	---	---	100.0	---	---	100.0	---	---
b. Equipment	100.0	---	---	100.0	---	---	100.0	---	---
c. Instruments.	100.0	---	---	100.0	---	---	100.0	---	---
16. a. Washing or soaking used equipment and supplies	100.0	---	---	100.0	---	---	100.0	---	---
b. Putting them on the cart to be returned to Central Supply to be autoclaved.	100.0	---	---	100.0	---	---	100.0	---	---
17. Caring for deceased persons:									
a. Notifying appropriate persons;	100.0	---	---	100.0	---	---	100.0	---	---
b. Washing and tying patient;	---	---	100.0	100.0	---	---	100.0	---	---
c. Removing IV's, tubes, dressings;	---	---	100.0	100.0	---	---	100.0	---	---
d. Going to morgue to get litter;	---	---	100.0	100.0	---	---	100.0	---	---
e. Taking deceased person to morgue.	---	---	100.0	50.0	---	50.0	100.0	---	---
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	100.0	---	---	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No.15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
19. a. Collecting urine, stool, or sputum specimens to be sent to lab;	100.0	---	---	100.0	---	---	100.0	---	---
b. Performing routine tests: pre-meal glucose, guiac, albumen, Ph, hematocrits	100.0	---	---	100.0	---	---	100.0	---	---
c. Obtaining a culture.	---	100.0	---	---	---	---	100.0	---	---
20. Giving routine morning care:									
a. Assisting patient in bathing and dressing, brushing teeth	50.0	---	50.0	100.0	---	---	---	---	100.0
b. Turning or positioning patient	100.0	---	---	100.0	---	---	---	---	100.0
c. Giving massages or alcohol rubs	---	---	100.0	100.0	---	---	---	---	100.0
d. Walking with patients	100.0	---	---	100.0	---	---	---	---	100.0
e. Getting patients in and out of bed	100.0	---	---	100.0	---	---	---	---	100.0
f. Assisting with range of motion or other exercises	---	---	100.0	---	---	100.0	---	---	100.0
g. Caring for bed sores with tincture of benzoine.	---	---	100.0	---	---	100.0	---	---	100.0
21. Preparing patients for bed at night:									
a. Changing or straightening linen	---	---	100.0	---	---	100.0	---	---	100.0
b. Turning or positioning patient	---	---	100.0	---	---	100.0	---	---	100.0
c. Assisting patient in washing and brushing teeth	---	---	100.0	---	---	100.0	---	---	100.0
d. Giving massages.	---	---	100.0	---	---	100.0	---	---	100.0
22. Assisting patients with the following:									
a. Walkers	---	---	100.0	50.0	50.0	---	100.0	---	---
b. Wheelchairs	100.0	---	---	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No.15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
22. c. Crutches	100.0	---	---	100.0	---	---	100.0	---	---
d. Braces	---	---	100.0	50.0	50.0	---	100.0	---	---
e. Artificial limbs.	---	---	100.0	---	50.0	50.0	---	---	100.0
23. Lifting patients on and off litters.	100.0	---	---	100.0	---	---	100.0	---	---
24. Taking and recording:									
a. Temperature	100.0	---	---	100.0	---	---	100.0	---	---
b. Pulse	100.0	---	---	100.0	---	---	100.0	---	---
c. Respiration rate	100.0	---	---	100.0	---	---	100.0	---	---
d. Blood pressure	100.0	---	---	100.0	---	---	100.0	---	---
e. Weight.	100.0	---	---	100.0	---	---	---	---	100.0
25. Assisting patient with Sitz bath.	---	---	100.0	---	---	100.0	---	---	100.0
26. Applying or changing:									
a. Ice bags	100.0	---	---	100.0	---	---	100.0	---	---
b. Hot water bottles	100.0	---	---	100.0	---	---	100.0	---	---
c. Ace bandages	100.0	---	---	100.0	---	---	100.0	---	---
d. Elastic stockings	---	---	100.0	50.0	50.0	---	100.0	---	---
e. Binders	100.0	---	---	50.0	50.0	---	100.0	---	---
f. Slings	100.0	---	---	100.0	---	---	100.0	---	---
g. Restraints.	100.0	---	---	100.0	---	---	100.0	---	---
27. Giving cleansing treatments:									
a. Enemas	---	---	100.0	100.0	---	---	100.0	---	---
b. Douches.	---	---	100.0	---	---	100.0	---	---	100.0
28. Caring for wounds:									
a. Dressing wounds	100.0	---	---	100.0	---	---	100.0	---	---
b. Irrigating wounds	100.0	---	---	100.0	---	---	100.0	---	---
c. Changing dressings.	100.0	---	---	100.0	---	---	100.0	---	---
29. Feeding patient by tube.	---	---	100.0	---	---	100.0	---	---	100.0
30. Caring for precaution or reverse precaution patients.	---	---	100.0	---	---	100.0	---	---	100.0

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[1] May not add to 100 percent because of rounding.

Table No. 15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicabl
31. a. Setting up suture sets;	50.0	---	50.0	100.0	---	---	100.0	---	---
b. Assisting doctor in removing sutures.	50.0	---	50.0	100.0	---	---	100.0	---	---
32. a. Doing cervical smears	100.0	---	---	100.0	---	---	---	100.0	---
b. Venereal disease smears.	100.0	---	---	---	100.0	---	---	100.0	---
33. Assisting doctor in dermatology problems:									
a. Wart removal	---	---	100.0	---	---	100.0	---	---	100.0
b. Skin biopsies.	---	---	100.0	---	---	100.0	---	---	100.0
34. Caring for lacerations:									
a. Wash laceration	100.0	---	---	100.0	---	---	100.0	---	---
b. Dress laceration.	100.0	---	---	100.0	---	---	100.0	---	---
35. Using EKG equipment:									
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	100.0	---	---
b. Setting up equipment	100.0	---	---	100.0	---	---	100.0	---	---
c. Attaching electrodes to patient	100.0	---	---	100.0	---	---	---	100.0	---
d. Operating EKG equipment.	100.0	---	---	100.0	---	---	---	100.0	---
36. Drawing blood.	100.0	---	---	100.0	---	---	---	100.0	---
37. a. Ordering drugs from pharmacy	100.0	---	---	100.0	---	---	---	100.0	---
b. Receiving drugs	100.0	---	---	100.0	---	---	---	100.0	---
c. Putting drugs away.	100.0	---	---	100.0	---	---	---	100.0	---
38. a. Administering specified medication	100.0	---	---	100.0	---	---	---	100.0	---
b. Noting time and amounts on patients' charts.	100.0	---	---	100.0	---	---	---	100.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
39. Performing functions related to oxygen masks, catheters:	100.0	---	---	100.0	---	---			
a. Bringing equipment to bedside (O)							100.0	---	---
(Cat.)							100.0	---	---
b. Assembling (O)							100.0	---	---
(Cat.)							100.0	---	---
c. Inserting or applying (O)							100.0	---	---
(Cat.)							100.0	---	---
d. Adjusting or caring for equipment (O)							100.0	---	---
(Cat.)							100.0	---	---
e. Removing. (O)							100.0	---	---
(Cat.)							100.0	---	---
41. Performing functions relating to IV's:									
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	100.0	---	---
b. Assembling	100.0	---	---	100.0	---	---	100.0	---	---
c. Inserting needle, starting IV, hanging bottles	---	100.0	---	---	100.0	---	---	100.0	---
d. Changing labeled bottles	100.0	---	---	100.0	---	---	100.0	---	---
e. Discontinuing IV service.	100.0	---	---	100.0	---	---	100.0	---	---
42. Assisting physicians during treatment and examination of patients:									
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	100.0	---	---
b. Preparing equipment or patient, assembling equipment	100.0	---	---	100.0	---	---	100.0	---	---
c. Holding or restraining patient as necessary	100.0	---	---	100.0	---	---	100.0	---	---
d. Removing and cleaning equipment afterwards.	100.0	---	---	100.0	---	---	100.0	---	---
43. Counting narcotics and barbiturates at the change of each shift.	100.0	---	---	100.0	---	---	---	100.0	---

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[1] May not add to 100 percent because of rounding.

Table No.15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
44. Observing and reporting to supervisor or physician:									
a. Patient's condition	100.0	---	---	50.0	50.0	---	100.0	---	---
b. Patient's reaction to drugs, treatments, IV's	100.0	---	---	50.0	50.0	---	100.0	---	---
c. Significant incidents.	100.0	---	---	50.0	50.0	---	100.0	---	---
45. a. Serving emotional support to patients	100.0	---	---	100.0	---	---	100.0	---	---
b. Entertaining patients (particularly children).	---	---	100.0	100.0	---	---	100.0	---	---
46. Participating in cardiac arrest team:									
a. Bringing equipment to bedside	100.0	---	---	100.0	---	---	100.0	---	---
b. Call "444"	100.0	---	---	100.0	---	---	100.0	---	---
c. Start external cardiac massage	100.0	---	---	100.0	---	---	100.0	---	---
d. Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation	100.0	---	---	100.0	---	---	100.0	---	---
e. Remove, clean equipment, restock emergency cart afterwards.	100.0	---	---	100.0	---	---	100.0	---	---
47. Beginning preparations for patient scheduled for surgery:									
a. Wash operative area	---	---	100.0	100.0	---	---	100.0	---	---
b. Shave operative area	---	---	100.0	100.0	---	---	100.0	---	---
c. Instruct patient not to eat or drink	---	---	100.0	100.0	---	---	100.0	---	---
d. Remove jewelry, bobby pins, dentures, or other prostheses.	---	---	100.0	100.0	---	---	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No.15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
48. Filling out accident reports.	50.0	---	50.0	---	---	100.0	100.0	---	---
49. Filling out:									
a. Stamping lab slips and requisitions	100.0	---	---	100.0	---	---	100.0	---	---
b. Making necessary arrangements for X-rays, lab work.	100.0	---	---	100.0	---	---	100.0	---	---
50. Checking and posting orders in MD order books.	100.0	---	---	50.0	---	50.0	---	100.0	---
51. Checking off diet manual each shift.	---	---	100.0	---	---	100.0	---	100.0	---
52. a. Recommending (or)	100.0	---	---	100.0	---	---	100.0	---	---
b. Arranging for a consultation with medical specialists, social service, psychiatry, etc.	100.0	---	---	100.0	---	---	100.0	---	---
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	100.0	---	---	100.0	---	---	---	100.0	---
54. Evaluating quality of nursing care.	100.0	---	---	---	100.0	---	---	100.0	---
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	100.0	---	---	---	100.0	---	---	100.0	---
56. Regularly inspecting rooms and wards for cleanliness and comfort.	100.0	---	---	100.0	---	---	---	100.0	---
57. Accompanying physicians on rounds.	---	---	100.0	100.0	---	---	---	100.0	---

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May not add to 100 percent because of rounding.

Table No.15 Percentage of Registered Nurses, Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Function[1]

FUNCTIONS	R. N.			L. P. N.			Orderly		
	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable	% Performing Function	% Not Performing Function	% Where Function Is Not Applicable
58. Investigating and adjusting complaints.	100.0	---	---	100.0	---	---	---	100.0	---
59. Supervising preparation and maintenance of patients' clinical records.	100.0	---	---	100.0	---	---	---	100.0	---
60. Giving change-of-shift report.	100.0	---	---	100.0	---	---	---	100.0	---
61. Teaching.	100.0	---	---	---	100.0	---	---	100.0	---
62. Research.	---	---	100.0	---	---	100.0	---	---	100.0
63. Supervisory duties.	100.0	---	---	---	100.0	---	---	100.0	---
64. Waiting for work.	100.0	---	---	100.0	---	---	---	100.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 16 Percentage of Licensed Practical Nurses and Orderlies[1] in the Emergency Room Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	L.P.N.		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
1. Straightening up and cleaning: patients' immediate furniture, nurses station, utility rooms, treatment rooms, nourishment center and litters.	100.0	20.0	100.0	8.0
2. Distributing mail and flowers.	----	----	----	----
3. Doing departmental errands: going to orthopedic department, Central Supply, laundry, IBM or records office, or operating room to help bring back a patient.	100.0	0.5	100.0	0.5
4. Doing errands for patients: making phone calls, refilling water jugs, preparing snacks or drinks from nourishment station, getting an extra pillow.	100.0	3.0	100.0	0.5
5. Giving and removing bedpans, assisting patient to use bedpan or urinal, helping patient to and from the bathroom.	100.0	3.0	100.0	3.0
6. Making beds: unoccupied, occupied, post-operative.	50.0	3.0	100.0	3.0
7. Answering patient calls.	----	----	100.0	0.5
8. Admitting patient: completing clothes list or valuables list, getting patient settled in bed, notifying intern.	100.0	0.5	100.0	3.0
9. Discharging patient: returning clothes and valuables, accompanying patient from floor.	100.0	0.5	100.0	0.5
10. Locating and setting up simple equipment: bed rails, footboards, sandbags, heel coverlets.	100.0	0.5	100.0	3.0
11. Taking patient to X-ray; taking lab specimens to lab.	100.0	3.0	100.0	8.0

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[1] RNs were omitted because they could not estimate time.

Table No. 16 Percentage of Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	L.P.N.		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
12. Assisting in moving patient to another floor.	100.0	3.0	100.0	8.0
13. Measuring food and fluid intake and output and totaling: urine jugs, tube drainage and IV intake, at the end of each shift.	100.0	0.5	----	----
14. Checking, delivering and picking up food trays; feeding patients.	----	----	----	----
15. Putting away supplies, instruments and equipment.	100.0	3.0	100.0	3.0
16. Washing or soaking used equipment and supplies, putting them on the cart to be returned to Central Supply.	100.0	3.0	100.0	3.0
17. Caring for deceased persons.	100.0	3.0	100.0	3.0
18. Giving information or directions to patients or visitors, or directing them to the correct source of information.	100.0	3.0	100.0	0.5
19. Collecting urine, stool, or sputum specimens to be sent to lab; performing routine tests; obtaining a culture.	100.0	3.0	100.0	3.0
20. Giving routine morning care.	100.0	8.0	----	----
21. Preparing patients for bed at night.	----	----	----	----
22. Assisting patients with walkers, wheelchairs, crutches and braces.	100.0	0.5	100.0	3.0
23. Lifting patients on and off litters.	100.0	3.0	100.0	3.0
24. Taking and recording: temperature, pulse, respiration rate, blood pressure and weight.	100.0	3.0	100.0	3.0
25. Assisting patient with Sitz bath.	----	----	----	----

Table No. 16 Percentage of Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	L.P.N.		ORDERLY	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
26. Applying or changing: ice bags, hot water bottles, ace bandages, elastic stockings, binders, slings, restraints.	100.0	8.0	100.0	8.0
27. Giving cleansing treatments: enemas, douches.	100.0	0.5	100.0	0.5
28. Caring for wounds: dressing, irrigating, changing dressing.	100.0	3.0	100.0	3.0
29. Feeding patient by tube.	----	----	----	----
30. Caring for precaution or reverse precaution patients.	----	----	----	----
31. Setting up suture sets, assisting doctor in removing sutures.	100.0	0.5	100.0	3.0
32. Doing cervical smears; venereal disease smears.	100.0	0.5	----	----
33. Assisting doctor in wart removal; skin biopsies.	----	----	----	----
34. Washing and dressing lacerations.	100.0	0.5	100.0	3.0
35. Using EKG equipment.	100.0	0.5	100.0	3.0
36. Drawing blood.	100.0	0.5	----	----
37. Ordering drugs from pharmacy; receiving and putting away drugs.	100.0	0.5	----	----
38. Administering specified medication; noting time and amounts on patients' charts.	100.0	3.0	----	----
39. Performing functions related to oxygen masks and catheters.	100.0	3.0	100.0	3.0
41. Performing functions relating to IV's.	100.0	3.0	100.0	0.5

Table No. 16 Percentage of Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	L.P.N.		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
42. Assisting physicians during treatment and examination of patients.	100.0	8.0	100.0	3.0
43. Counting narcotics and barbiturates at the change of each shift.	100.0	0.5	----	----
44. Observing and reporting to supervisor or physician on patient's condition, reaction to drugs, treatments, IV's, significant incidents.	50.0	0.5	100.0	3.0
45. Serving emotional support to patients; entertaining patients (particularly children).	100.0	0.5	100.0	0.5
46. Participating in cardiac arrest team.	100.0	3.0	100.0	0.5
47. Beginning preparations for patient scheduled for surgery.	100.0	0.5	100.0	3.0
48. Filling out accident reports.	----	----	100.0	3.0
49. Stamping lab slips and requisitions; making necessary arrangements for X-rays and lab work.	100.0	3.0	100.0	3.0
50. Checking and posting orders in MD order books.	50.0	0.5	----	----
51. Checking off diet manual each shift.	----	----	----	----
52. Recommending or arranging for a consultation with medical specialists, social service, psychiatry, etc.	100.0	0.5	100.0	0.5
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	100.0	0.5	----	----
54. Evaluating quality of nursing care.	----	----	----	----

Table No. 16 Percentage of Licensed Practical Nurses and Orderlies in the Emergency Room Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	L.P.N.		ORDERLY	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	----	----	----	----
56. Regularly inspecting rooms and wards for cleanliness and comfort.	100.0	0.5	----	----
57. Accompanying physicians on rounds.	100.0	0.5	----	----
58. Investigating and adjusting complaints.	100.0	0.5	----	----
59. Supervising preparation and maintenance of patients' clinical records.	100.0	0.5	----	----
60. Giving change-of-shift report.	100.0	3.0	----	----
61. Teaching.	----	----	----	----
62. Research.	----	----	----	----
63. Supervisory duties.	----	----	----	----
64. Waiting for work.	100.0	0.5	----	----

Table No. 17 Percentage of Ward Secretaries Performing Each Function[1], and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function

FUNCTIONS	WARD SECRETARY		
	% Performing Function	% of Total Working Time Spent on Function	% Not Performing Function
1. Charting vital signs, intake and output, and weights.	100.0	21.3	---
2. Preparing admission and discharge records, transfer records.	100.0	8.8	---
3. Ordering central supplies as requested by Head Nurse.	100.0	1.8	---
4. Checking diet chart twice a day for correctness.	33.3	0.5	66.7
5. Inserting completed lab and X-ray slips in patients' charts.	100.0	6.7	---
6. Straightening up nurses' station.	66.7	4.8	33.3
7. Collecting and sorting patients' records; calling dispatcher to come to pick up old records if necessary.	100.0	3.4	---
8. Maintaining a current Kardex.	50.0	1.3	50.0
9. Answering questions, giving information to patients or visitors, or directing the questions to appropriate personnel.	100.0	3.8	---
10. Answering the telephone and the intercom, and notifying the appropriate personnel.	100.0	9.8	---
11. Making phone calls as requested by department staff or patients.	100.0	6.7	---
12. Ordering stationery supplies for the nursing unit.	100.0	1.3	---
13. Operating the addressograph.	100.0	4.3	---
14. Filling out condition sheets.	83.3	0.5	16.7
15. Booking appointments outside the hospital (e.g., a brain scan at Mt. Auburn Hospital); arranging for transportation.	100.0	0.5	---

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[1] May not add to 100 percent because of rounding.

Table No. 17 Percentage of Ward Secretaries Performing Each Function[1], and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function

FUNCTIONS	WARD SECRETARY		
	% Performing Function	% of Total Working Time Spent on Function	% Not Performing Function
16. Putting away supplies and equipment, or making sure they are put away.	100.0	2.6	---
17. Other functions:			
a. Ward secretary meeting.	100.0	3.0	---
b. Taking patient down after discharge.	100.0	2.6	---
c. Going to Central Supply or lab; departmental errands.	100.0	5.0	---
d. Distribute mail and flowers.	100.0	1.3	---
e. Training new ward secretaries.	16.7	0.5	83.3

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[1] May not add to 100 percent because of rounding.

Table No. 18 Percentage Distribution of Ward Secretaries' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	(1) QUESTION	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	HOUSEKEEPING	WARD SECRETARY	OTHER	H.N. OR DEPARTMENT SUPERVISOR	OTHER APPROPRIATE DEPARTMENT
1. Charting vital signs, intake and output, and weights.	U	----	----	----	----	----	----	100.0	---	----	----
	S	----	----	----	----	----	----	100.0	---	----	----
2. Preparing admission and discharge records, transfer records.	U	----	----	----	----	----	----	100.0	---	16.6	----
	S	----	----	----	----	----	----	100.0	---	----	----
3. Ordering central supplies as requested by Head Nurse.	U	----	----	16.6	----	----	----	100.0	----	16.6	----
	S	----	----	----	----	----	----	83.3	----	33.3	----
4. Checking diet chart twice a day for correctness.	U	20.0	20.0	----	----	----	----	----	----	80.0	----
	S	----	----	----	----	----	----	80.0	----	60.0	----
5. Inserting completed lab and X-ray slips in patients' charts.	U	----	----	----	----	----	----	100.0	----	----	----
	S	----	----	----	----	----	----	100.0	----	----	----
6. Straightening up nurses' station.	U	50.0	50.0	16.6	16.6	----	----	66.6	----	50.0	----
	S	33.3	33.3	16.6	16.6	----	16.6	83.3	----	50.0	----
7. Collecting and sorting patients' records; calling dispatcher to come to pick up old records if necessary.	U	16.6	16.6	----	----	----	----	100.0	16.6	----	----
	S	----	----	----	----	----	----	83.3	33.3	----	----
8. Maintaining a current Kardex.	U	60.0	60.0	----	----	----	----	60.0	----	----	----
	S	33.3	33.3	----	----	----	----	50.0	----	16.6	----
9. Answering questions, giving information to patients or visitors or redirecting the question to appropriate personnel.	U	83.3	83.3	16.6	16.6	16.6	----	100.0	----	----	----
	S	66.6	66.6	16.6	16.6	16.6	----	66.6	----	33.3	----
10. Answering the telephone and the intercom and notifying the appropriate personnel.	U	16.6	16.6	----	----	----	----	100.0	33.3	----	----
	S	20.0	20.0	----	----	----	----	100.0	----	40.0	----
11. Making phone calls as requested by department staff or patients.	U	66.6	66.6	----	----	16.6	----	100.0	----	----	----
	S	50.0	50.0	----	----	16.6	----	100.0	----	----	----
12. Ordering stationery supplies for the nursing unit.	U	----	----	----	----	----	----	100.0	----	----	----
	S	----	----	----	----	----	----	100.0	----	----	----
13. Operating the addressograph.	U	100.0	100.0	83.3	83.3	83.3	----	100.0	16.6	----	----
	S	66.6	66.6	66.6	66.6	66.6	----	100.0	16.6	----	----
14. Filling out condition sheets.	U	33.3	33.3	----	----	----	----	66.6	----	66.6	----
	S	33.3	33.3	----	----	----	----	50.0	50.0	----	----
15. Booking appointments outside the hospital (e.g., a brain scan at Mt. Auburn Hospital); arranging for transportation.	U	16.6	16.6	----	----	16.6	----	100.0	----	33.3	----
	S	16.6	16.6	----	----	16.6	----	100.0	----	33.3	----

1. "U" means usually
"S" means should.

Table No. 18 Percentage Distribution of Ward Secretaries' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	R.N.	L.P.N.	NURSES' AIDE	ORDERLY	M.D.	HOUSEKEEPING	WARD SECRETARY	OTHER	H.N. OR DEPARTMENT SUPERVISOR	OTHER APPROPRIATE DEPARTMENT	LAB TECHNICIAN
16. Putting away supplies and equipment, or making sure they are put away.	U	16.6	16.6	50.0	----	----	----	100.0	----	----	----	----
	S	----	----	66.6	16.6	----	----	100.0	----	----	----	----
17. Other functions: a. Ward secretary meeting.	U	----	----	----	----	----	----	100.0	----	----	----	----
	S	----	----	----	----	----	----	100.0	----	----	----	----
b. Taking patient down after discharge.	U	----	----	83.3	----	----	----	83.3	----	----	----	----
	S	----	----	83.3	----	----	----	83.3	----	----	----	----
c. Going to Central Supply or lab.	U	----	----	83.3	----	----	----	100.0	----	----	----	----
	S	----	----	50.0	----	----	----	66.6	16.6	----	16.6	16.6
d. Distributing mail and flowers.	U	----	----	16.6	66.6	----	----	83.3	----	----	----	----
	S	83.3	83.3	83.3	83.3	----	----	100.0	----	----	----	----
e. Training new ward secretaries.	U	----	----	----	----	----	----	100.0	----	----	----	----
	S	----	----	----	----	----	----	100.0	----	----	----	----

1. "U" means usually;
"S" means should.

Table No. 19 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the Operating Room Performing Each Function [1]

FUNCTIONS	R.N.			TECHNICIAN			NURSES' AIDF		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
1. Clean the following:									
a. Dirty work rooms	100.0	----	----	85.7	14.3	----	----	100.0	----
b. Lavatories	----	100.0	----	----	100.0	----	----	100.0	----
c. Halls	----	100.0	----	----	100.0	----	----	100.0	----
d. Lounges	----	100.0	----	14.3	85.7	----	----	100.0	----
e. Litters.	25.0	75.0	----	42.9	57.1	----	----	100.0	----
2. a. Clean Operating Room area and equipment	100.0	----	----	100.0	----	----	100.0	----	----
b. Rewrap equipment to be sent to Central Supply	100.0	----	----	100.0	----	----	100.0	----	----
c. Remake room for next operation.	100.0	----	----	85.7	14.3	----	----	100.0	----
3. Care for used instruments after operation in the following ways:									
a. Account for them	25.0	50.0	25.0	85.7	14.3	----	----	100.0	----
b. Clean	75.0	25.0	----	85.7	14.3	----	100.0	----	----
c. Rewrap	75.0	25.0	----	57.1	42.9	----	100.0	----	----
d. Autoclave.	----	75.0	25.0	----	85.7	14.3	100.0	----	----
4. Use autoclave to sterilize instruments during operation.	100.0	----	----	100.0	----	----	100.0	----	----
5. a. Order supplies from storeroom or Central Supply	----	100.0	----	----	100.0	----	100.0	----	----
b. Receive supplies	50.0	50.0	----	71.4	28.6	----	100.0	----	----
c. Arrange them on shelves in proper storage position.	75.0	25.0	----	100.0	----	----	100.0	----	----

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1. May not add to 100 percent because of rounding

Table No. 19 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the Operating Room Performing Each Function [1]

FUNCTIONS	R.N.			TECHNICIAN			NURSES' AIDE		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
6. a. Check supplies and equipment after operation	100.0	----	----	100.0	----	-----	100.0	----	----
b. Restock cabinets if necessary	100.0	----	----	100.0	----	----	100.0	----	----
c. Check for outdated supplies.	100.0	----	----	100.0	----	----	100.0	----	----
7. a. Type out schedules for the following day	----	100.0	----	----	100.0	----	----	100.0	----
b. List daily operations and daily patients.	----	100.0	----	----	100.0	----	----	100.0	----
8. a. Make out list of supplies used during operation	100.0	----	----	100.0	----	----	----	100.0	----
b. Make out and record charges to patients	100.0	----	----	42.9	57.1	----	----	100.0	----
c. Distribute this information to the appropriate departments.	----	100.0	----	----	100.0	----	----	100.0	----
9. Take dictation and type correspondence as necessary.	----	100.0	----	----	100.0	----	----	100.0	----
10. a. Answer phone calls and notify appropriate personnel	100.0	----	----	100.0	----	----	100.0	----	----
b. Make phone calls as requested (including calling in medication order to the floor one hour preceding surgery.)	75.0	25.0	----	85.7	14.3	----	100.0	----	----

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1. May not add to 100 percent because of rounding

Table No. 19 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the Operating Room Performing Each Function[1]

	R.N.			TECHNICIAN			NURSES' AIDE		
FUNCTIONS	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic
11. Keep clean, but unsterile equipment or instruments dust free.	75.0	25.0	----	100.0	----	----	100.0	----	----
12. Go to surgical floor to pick up pre-operative patient by litter.	75.0	----	25.0	57.1	42.9	----	100.0	----	----
13. Prepare surgical kits for upcoming operations:									
a. Select, gather instruments	75.0	25.0	----	85.7	14.3	----	100.0	----	----
b. Put them on cart to be picked up by Central Supply.	75.0	25.0	----	85.7	14.3	----	100.0	----	----
14. Wash and shave operative area of patient, going to the surgical floor prior to the operation.	----	100.0	----	71.4	28.6	----	100.0	----	----
15. a. Wash	100.0	----	----	85.7	14.3	----	----	100.0	----
b. Shave	100.0	----	----	85.7	14.3	----	----	100.0	----
c. Assist in sterilizing the operative area when the patient is properly positioned on the table.	75.0	----	25.0	85.7	14.3	----	----	100.0	----
16. Place equipment and instruments in Operating Room for upcoming operations and arrange them according to the requirements of the operation.	100.0	----	----	100.0	----	----	----	100.0	----

[1] May not add to 100 percent because of rounding

Table No. 19 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the Operating Room Performing Each Function[1]

FUNCTIONS	R.N.			TECHNICIAN			NURSES' AIDE		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
17. a. Move patient onto operating room table from litter	100.0	----	----	100.0	----	----	100.0	----	----
b. Position, secure, and drape patient as necessary.	50.0	50.0	----	100.0	----	----	----	100.0	----
18. Aid surgical team to don gowns and gloves.	100.0	----	----	100.0	----	----	100.0	----	----
19. Adjust the following during operation:									
a. Lights	100.0	----	----	100.0	----	----	----	100.0	----
b. Suction	100.0	----	----	100.0	----	----	----	100.0	----
c. Oxygen equipment	----	100.0	----	----	100.0	----	----	100.0	----
d. Tables.	100.0	----	----	85.7	14.3	----	----	100.0	----
20. Leave Operating Room during operation:									
a. To obtain additional supplies, instruments	100.0	----	----	100.0	----	----	----	100.0	----
b. To order additional units of blood, glucose, plasma, or saline	100.0	----	----	100.0	----	----	----	100.0	----
c. Arrange to have an X-ray or a lab test done.	100.0	----	----	85.7	----	14.3	----	100.0	----
21. Obtain a culture during an operation.	100.0	----	----	100.0	----	----	----	100.0	----
22. Accept, label and record all specimens received from surgeon.	100.0	----	----	100.0	----	----	----	100.0	----

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1. May not add to 100 percent because of rounding

Table No. 19

Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the Operating Room Performing Each Function[1]

FUNCTIONS	R.N.			TECHNICIAN			NURSES' AIDE		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
23. Set up and adjust a cautery under surgeon's directions.	100.0	----	----	100.0	----	----	----	100.0	----
24. Care for a deceased person:									
a. Notify appropriate personnel	----	----	100.0	14.3	----	85.7	----	100.0	----
b. Tie and pad person	----	----	100.0	14.3	----	85.7	----	100.0	----
c. Remove IV's and dressings	----	----	100.0	14.3	----	85.7	----	100.0	----
d. Take person to morgue.	----	----	100.0	14.3	----	85.7	----	100.0	----
25. a. Assist in moving post-operative patient from operating table to litter	100.0	----	----	100.0	----	----	100.0	----	----
b. Assist in moving litter to recovery room.	100.0	----	----	85.7	14.3	----	100.0	----	----
26. Keep track of needles and instruments used during operation.	25.0	75.0	----	100.0	----	----	----	100.0	----
27. Assist in sponge count after operation.	100.0	----	----	100.0	----	----	----	100.0	----
28. a. Hand instrument and supplies to surgeon	25.0	75.0	----	100.0	----	----	----	100.0	----
b. Hold retractors	----	100.0	----	100.0	----	----	----	100.0	----
c. Cut sutures as directed during operation.	----	100.0	----	100.0	----	----	----	100.0	----

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1. May not add to 100 percent because of rounding

Table No. 19 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in Operating Room Performing Each Function [1]

FUNCTIONS	R.N.			TECHNICIAN			NURSES' AIDE		
	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Function is Not Applic
29. Assist surgeon or anaesthesiologist in administering:									
a. Plasma	100.0	----	----	57.1	42.9	----	----	100.0	----
b. Blood	100.0	----	----	85.7	----	14.3	----	100.0	----
c. Glucose	100.0	----	----	57.1	42.9	----	----	100.0	----
d. Medications, other injections or transfusions during operation.	100.0	----	----	100.0	----	----	----	100.0	----
30. Assist surgical team in case of patient's cardiac arrest:									
a. Assist in passing instruments	----	25.0	75.0	42.9	14.3	42.9	----	100.0	----
b. Bring in, assemble equipment	25.0	----	75.0	42.9	14.3	42.9	----	100.0	----
c. Operate equipment	25.0	----	75.0	14.3	28.6	57.1	----	100.0	----
d. Draw up medications.	25.0	----	75.0	28.6	----	71.4	----	100.0	----
31. Check or double check patient's chart upon his or her arrival to the Operating Room area to be sure lab work is done, his operative permit is signed, preoperative medications have been given, and so on.	100.0	----	----	71.4	28.6	----	----	100.0	----
32. Book operations in conjunction with anaesthesiology.	----	100.0	----	----	100.0	----	----	100.0	----

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1. May not add to 100 percent because of rounding

Table No. 19 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the Operating Room Performing Each Function [1]

	R.N.			TECHNICIAN			NURSES' AIDE		
FUNCTIONS	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.	% Performing Function	% Not Performing Function	% Where Funct. is Not Applic.
33. Schedule and assign personnel to scrub, to circulate, or to assist in operating rooms.	----	100.0	----	----	100.0	----	----	100.0	----
34. Inspect operating rooms and work rooms for order and cleanliness.	25.0	75.0	----	28.6	71.4	----	----	100.0	----
35. Orient and train new employees.	----	100.0	----	57.1	42.9	----	100.0	----	----
36. Supervise and evaluate quality of the work done by operating room personnel.	----	100.0	----	----	100.0	----	----	100.0	----
37. Supervise maintenance of records.	----	100.0	----	----	100.0	----	----	100.0	----
38. Investigate and adjust complaints and problems.	----	100.0	----	----	100.0	----	----	100.0	----
39. Other functions.	50.0	50.0	----	42.9	57.1	----	----	100.0	----
40. Research.	----	----	100.0	----	----	100.0	----	----	100.0
41. Teaching.	25.0	75.0	----	57.1	42.9	----	----	100.0	----
42. Waiting for work.	100.0	----	----	100.0	----	----	----	100.0	----

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1. May not add to 100 percent because of rounding

Table No. 20 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the OPERATING ROOM Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		Technician		Nurses' Aide	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
1. Clean dirty work rooms, lavatories, halls, lounges, litters.	100.0	0.5	100.0	1.2	---	---
2. Clean operating room area and equipment; rewrap equipment to be sent to Cental Supply; remake room for next operation.	100.0	6.8	100.0	10.1	100.0	13.0
3. Care for used instruments after operation.	75.0	2.8	85.7	14.3	100.0	30.0
4. Use autoclave to sterilize instruments during operation.	100.0	3.6	100.0	2.3	100.0	0.5
5. Order and receive supplies from storeroom or Cental Supply; arrange them correctly on shelves.	75.0	1.8	100.0	2.6	100.0	8.0
6. Check supplies and equipment after operation; restock cabinets if necessary; check for outdated supplies.	100.0	3.6	100.0	6.6	100.0	3.0
7. Type out schedules for the following day; list daily operations and daily patients.	---	---	---	---	---	---
8. Make out list of supplies used during operation; make out and record charges to patients; distribute this information to the appropriate departments.	100.0	3.0	100.0	0.9	---	---
9. Take dictation and type correspondence as necessary.	---	---	---	---	---	---

Table No. 20 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the OPERATING ROOM Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		Technician		Nurses' Aide	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
10. Answer phone calls and notify appropriate personnel; make phone calls as requested.	100.0	0.5	100.0	1.2	100.0	0.5
11. Keep clean, but unsterile equipment or instruments dust free.	75.0	1.3	100.0	3.0	100.0	3.0
12. Go to surgical floor to pick up preoperative patient by litter.	75.0	0.5	57.1	1.8	100.0	0.5
13. Prepare surgical kits for upcoming operations.	75.0	2.2	85.7	2.0	100.0	38.0
14. Wash and shave operative area of patient going to the surgical floor prior to the operation.	---	---	71.4	1.0	100.0	13.0
15. Wash, shave, and assist in sterilizing the operative area when the patient is properly positioned on the table.	100.0	1.1	100.0	0.9	---	---
16. Place equipment and instruments in operating room for upcoming operations and arrange them according to the requirements of the operation.	100.0	9.3	100.0	11.9	---	---
17. Move patient onto operating room table from litter; position, secure, and drape patient as necessary.	100.0	3.0	100.0	3.7	100.0	0.5
18. Aid surgical team to don gowns and gloves.	100.0	3.0	100.0	3.7	100.0	0.5

Table No. 20 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the OPERATING ROOM performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		Technician		Nurses' Aide	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
19. Adjust equipment during operation: lights, suction, oxygen equipment, tables.	100.0	4.3	100.0	3.0	---	---
20. Leave operating room during operation: to obtain additional supplies; to order additional units of blood, glucose, plasma or saline; arrange to have an X-ray or a lab test done.	100.0	5.5	100.0	3.0	---	---
21. Obtain a culture during an operation.	100.0	0.5	100.0	0.5	---	---
22. Accept, label, and record all specimens received from surgeon.	100.0	3.0	100.0	1.9	---	---
23. Set up and adjust a cautery under surgeon's directions.	100.0	1.8	100.0	0.9	---	---
24. Care for a deceased person.	---	---	14.3	0.5	---	---
25. Assist in moving post-operative patient from operating table to litter; assist in moving litter to recovery room.	100.0	5.5	100.0	5.1	100.0	0.5
26. Keep track of needles and instruments used during operation.	25.0	0.5	100.0	3.0	---	---
27. Assist in sponge count after operation.	100.0	5.5	100.0	3.0	---	---
28. Hand instruments and supplies to surgeon; hold retractors; cut sutures as directed during operation.	25.0	0.5	100.0	25.4	---	---

Table No. 20 Percentage of Registered Nurses, Surgical Technicians and Nurses' Aides in the OPERATING ROOM Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R. N.		Technician		Nurses' Aide	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
29. Assist surgeon or anaesthesiologist in administering plasma, blood, glucose, medications, other injections or transfusions during operation.	100.0	2.4	100.0	1.6	---	---
30. Assist surgical team in case of patient's cardiac arrest.	25.0	0.5	71.4	0.5	---	---
31. Check or double check patient's chart upon his or her arrival to the operating room.	100.0	1.8	71.4	1.1	---	---
32. Book operations in conjunction with anaesthesiology.	---	---	---	---	---	---
33. Schedule and assign personnel to scrub, to circulate, or to assist in operating rooms.	---	---	---	---	---	---
34. Inspect operating rooms and work rooms for order and cleanliness.	25.0	0.5	28.6	0.5	---	---
35. Orient and train new employees.	---	---	57.1	1.8	100.0	0.5
36. Supervise and evaluate quality of the work done by operating room personnel.	---	---	---	---	---	---
37. Supervise maintenance of records.	---	---	---	---	---	---
38. Investigate and adjust complaints and problems.	---	---	---	---	---	---
39. Other functions.	50.0	1.8	42.9	3.0	---	---
40. Research.	---	---	---	---	---	---
41. Teaching.	25.0	0.5	57.1	0.5	---	---
42. Waiting for work.	100.0	11.0	100.0	11.1	---	---

Table No. 21 Percentage Distribution of Operating Room Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	Nurses' Aide	Orderly	Housekeeping	Head Nurse or Dept. Supervisor	O.R. Circulator	O.R. Scrub Tech.
1. Clean the following:							
(a) Dirty work rooms	R.N.	100.0	---	100.0	---	---	---
	Tech.	57.2	28.6	85.8	---	---	---
	Aide	100.0	---	---	---	---	---
(b) Lavatories	R.N.	100.0	---	100.0	---	---	---
	Tech.	42.9	28.6	100.0	---	---	---
	Aide	---	---	100.0	---	---	---
(c) Halls	R.N.	100.0	---	100.0	---	---	---
	Tech.	42.9	28.6	100.0	---	---	---
	Aide	---	---	100.0	---	---	---
(d) Lounges	R.N.	100.0	---	100.0	---	---	---
	Tech.	42.9	28.6	100.0	---	---	---
	Aide	---	---	100.0	---	---	---
(e) Litters.	R.N.	100.0	---	100.0	---	---	---
	Tech.	57.2	28.6	85.8	---	---	---
	Aide	---	---	100.0	---	---	---
2. (a) Clean Operating Room area and equipment	R.N.	75.0	---	75.0	---	---	---
	Tech.	57.2	---	71.5	---	---	14.3
	Aide	100.0	---	100.0	---	---	---
(b) Rewrap equipment to be sent to Central Supply	R.N.	100.0	---	---	---	100.0	100.0
	Tech.	85.8	---	14.3	---	100.0	100.0
	Aide	100.0	---	---	---	---	---
(c) Remake room for next operation.	R.N.	100.0	---	25.0	---	25.0	25.0
	Tech.	42.9	---	71.5	---	---	---
	Aide	---	---	100.0	---	---	---
3. Care for used instruments after operation in the following ways:							
(a) Account for them	R.N.	25.0	---	---	---	---	75.0
	Tech.	33.3	---	---	---	33.3	83.4
	Aide	---	---	---	---	---	100.0
(b) Clean	R.N.	25.0	---	---	---	---	75.0
	Tech.	33.3	---	---	---	33.3	83.4
	Aide	100.0	---	---	---	---	---
(c) Rewrap	R.N.	25.0	---	---	---	---	75.0
	Tech.	50.0	---	---	---	33.3	83.4
	Aide	100.0	---	----	---	---	---
(d) Autoclave.	R.N.	25.0	---	---	---	---	75.0
	Tech.	50.0	---	---	---	33.3	83.4
	Aide	---	---	---	---	---	100.0
4. Use autoclave to sterilize instruments during operation.	R.N.	---	---	---	---	100.0	---
	Tech.	28.6	---	---	---	71.5	42.9
	Aide	---	---	---	---	100.0	---

Table No. 21 Percentage Distribution of Operating Room Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	Nurses' Aide	Orderly	Ward Secretary	Head Nurse or Department Supervisor	O.R. Circulator	O.R. Scrub Tech.
5. (a) Ordering supplies from storeroom or Central Supply	R.N.	75.0	---	---	50.0	---	---
	Tech.	85.8	---	---	42.9	14.3	---
	Aide	---	---	---	---	---	---
(b) Receive supplies	R.N.	100.0	---	---	---	---	---
	Tech.	100.0	---	---	---	---	---
	Aide	100.0	---	---	---	---	---
(c) Arrange them on shelves in proper storage position.	R.N.	100.0	---	---	---	---	---
	Tech.	100.0	14.3	---	---	57.2	57.2
	Aide	100.0	---	---	---	---	---
6. (a) Check supplies and equipment after operation	R.N.	50.0	---	---	---	100.0	100.0
	Tech.	14.3	---	---	---	85.8	100.0
	Aide	---	---	---	---	---	---
(b) Restock cabinets if necessary	R.N.	50.0	---	---	---	100.0	100.0
	Tech.	14.3	---	---	---	85.8	100.0
	Aide	---	---	---	---	---	---
(c) Check for outdated supplies.	R.N.	50.0	---	---	---	100.0	100.0
	Tech.	14.3	---	---	---	85.8	100.0
	Aide	---	---	---	---	---	---
7. (a) Type out schedules for the following day	R.N.	---	---	100.0	---	---	---
	Tech.	---	---	100.0	---	---	---
	Aide	---	---	---	---	---	---
(b) List daily operations and daily patients.	R.N.	---	---	100.0	---	---	---
	Tech.	---	---	100.0	---	---	---
	Aide	---	---	---	---	---	---
8. (a) Make out list of supplies used during operation	R.N.	---	---	---	---	100.0	---
	Tech.	---	---	---	---	100.0	14.3
	Aide	---	---	---	---	---	---
(b) Make out and record charges to patients	R.N.	---	---	---	---	100.0	---
	Tech.	---	---	---	---	100.0	14.3
	Aide	---	---	---	---	---	---
(c) Distribute this information to the appropriate departments.	R.N.	---	---	75.0	---	25.0	---
	Tech.	---	---	85.8	---	14.3	---
	Aide	---	---	---	---	---	---
9. Take dictation and type correspondence as necessary.	R.N.	---	---	100.0	---	---	---
	Tech.	---	---	100.0	---	---	---
	Aide	---	---	---	---	---	---
10. (a) Answer phone calls and notify appropriate personnel	R.N.	---	---	100.0	---	25.0	---
	Tech.	---	---	100.0	---	---	---
	Aide	100.0	---	100.0	---	100.0	100.0
(b) Make phone calls as requested (including calling in medication orders to the floor one hour preceding surgery).	R.N.	---	---	100.0	---	25.0	---
	Tech.	14.3	---	85.8	---	42.9	28.6
	Aide	100.0	---	100.0	---	100.0	100.0

Table No. 21 Percentage Distribution of Operating Room Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	Nurses' Aide	Orderly	Doctor	Housekeeping	Ward Secretary	Head Nurse or Dept. Supervisor	Another Appropriate Department	O.R. Circulator	O.R. Scrub Tech.
11. Keep clean, but unsterile equipment or instruments, dust free.	R.N.	50.0	---	---	---	---	---	---	75.0	75.0
	Tech.	42.9	---	---	---	---	---	---	57.2	85.8
	Aide	---	---	---	---	---	---	---	100.0	100.0
12. Go to surgical floor to pick up pre-operative patient by litter.	R.N.	---	100.0	---	---	---	---	25.0	---	---
	Tech.	---	85.8	---	---	---	---	---	---	57.2
	Aide	---	---	---	---	---	---	---	---	---
13. Prepare surgical kits for upcoming operations:										
(a) Select, gather instruments	R.N.	100.0	---	---	---	---	---	---	---	---
	Tech.	100.0	---	---	---	---	---	---	---	---
	Aide	100.0	---	---	---	---	---	---	---	---
(b) Put them on cart to be picked up by Central Supply.	R.N.	100.0	---	---	---	---	---	---	---	---
	Tech.	100.0	---	---	---	---	---	---	---	---
	Aide	100.0	---	---	---	---	---	---	---	---
14. Wash and shave operative area of patient going to the surgical floor prior to the operation.	R.N.	100.0	---	---	---	---	---	---	---	75.0
	Tech.	42.9	57.2	---	---	---	---	---	---	42.9
	Aide	100.0	---	---	---	---	---	---	---	100.0
15. (a) Wash	R.N.	---	---	100.0	---	---	---	---	100.0	100.0
	Tech.	---	---	42.9	---	---	---	---	57.2	57.2
	Aide	---	---	---	---	---	---	---	100.0	100.0
(b) Shave	R.N.	---	---	50.0	---	---	---	---	50.0	25.0
	Tech.	---	---	71.5	---	---	---	---	42.9	42.9
	Aide	---	---	---	---	---	---	---	100.0	100.0
(c) Assist in sterilizing the operative area when the patient is properly positioned on the table.	R.N.	---	---	100.0	---	---	---	---	---	25.0
	Tech.	---	---	85.8	---	---	---	---	28.6	28.6
	Aide	---	---	---	---	---	---	---	100.0	100.0
16. Place equipment and instruments in the Operating Room for the upcoming operations and arrange them according to the requirements of the operation.	R.N.	---	---	---	---	---	---	---	100.0	75.0
	Tech.	---	---	---	---	---	---	---	85.8	100.0
	Aide	---	---	---	---	---	---	---	100.0	100.0
17. (a) Move patient onto operating room table from litter	R.N.	---	---	---	---	---	---	---	100.0	25.0
	Tech.	---	---	---	---	---	---	---	100.0	28.6
	Aide	---	---	---	---	---	---	---	100.0	100.0
(b) Position, secure, and drape patient as necessary.	R.N.	---	---	25.0	---	---	---	---	100.0	50.0
	Tech.	---	---	57.2	---	---	---	---	85.8	71.5
	Aide	---	---	---	---	---	---	---	100.0	100.0
18. Aid surgical team to don gown and gloves.	R.N.	---	---	---	---	---	---	---	100.0	100.0
	Tech.	---	---	---	---	---	---	---	57.2	100.0
	Aide	---	---	---	---	---	---	---	100.0	100.0
19. Adjust the following during operation:										
(a) Lights	R.N.	---	---	---	---	---	---	---	100.0	50.0
	Tech.	---	---	28.6	---	---	---	---	71.5	71.5
	Aide	---	---	---	---	---	---	---	100.0	100.0

Table No. 21

Percentage Distribution of Operating Room Personnel's Response to "Who Usually Performs this Function?"

FUNCTIONS	Respondents	Nurses' Aide	Orderly	Doctor	Housekeeping	Ward Secretary	Head Nurse or Dept. Supervisor	Another Appropriate Department	O.R. Circulator	O.R. Scrub Tech.
(b) Suction	R.N.	---	---	---	---	---	---	---	100.0	50.0
	Tech.	---	---	14.3	---	---	---	---	71.5	85.8
	Aide	---	---	---	---	---	---	---	100.0	100.0
(c) Oxygen equipment	R.N.	---	---	---	---	---	---	100.0	---	---
	Tech.	---	---	---	---	---	---	100.0	---	---
	Aide	---	---	---	---	---	---	100.0	---	---
(d) Tables.	R.N.	---	---	---	---	---	---	---	75.0	50.0
	Tech.	---	---	---	---	---	---	42.9	42.9	57.2
	Aide	---	---	---	---	---	---	---	100.0	100.
20. Leave Operating Room during operation:										
(a) To obtain additional supplies, instruments	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	---	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	---	---
(b) To order additional units of blood, glucose, plasma, or saline	R.N.	---	---	---	---	---	---	25.0	100.0	---
	Tech.	---	---	---	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	---	---
(c) Arrange to have an X-Ray or a lab test done.	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	---	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	---	---
21. Obtain a culture during an operation.	R.N.	---	---	100.0	---	---	---	---	100.0	100.
	Tech.	---	---	85.8	---	---	---	---	100.0	85.
	Aide	---	---	---	---	---	---	---	---	---
22. Accept, label, and record all specimens received from surgeon.	R.N.	---	---	50.0	---	---	---	---	100.0	50.
	Tech.	---	---	28.6	---	---	---	---	100.0	57.
	Aide	---	---	---	---	---	---	---	---	---
23. Set up and adjust a cautery under surgeon's directions.	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	---	---	---	---	---	100.0	14.
	Aide	---	---	---	---	---	---	---	---	---
24. Care for a deceased person:										
(a) Notify appropriate personnel	R.N.	---	---	25.0	---	---	---	---	100.0	100.
	Tech.	---	---	---	---	---	---	---	100.0	100.
	Aide	---	---	---	---	---	---	---	100.0	100.
(b) Tie and pad person	R.N.	---	---	25.0	---	---	---	---	100.0	100.
	Tech.	---	---	---	---	---	---	---	100.0	100.
	Aide	---	---	---	---	---	---	---	100.0	100.
(c) Remove IVs and dressings	R.N.	---	---	25.0	---	---	---	---	100.0	100.
	Tech.	---	---	---	---	---	---	---	100.0	100.
	Aide	---	---	---	---	---	---	---	100.0	100.
(d) Take person to morgue.	R.N.	---	---	25.0	---	---	---	---	100.0	100.
	Tech.	---	---	---	---	---	---	---	100.0	100.
	Aide	---	---	---	---	---	---	---	100.0	100.

Table No. 21

Percentage Distribution of Operating Room Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	Nurses' Aide	Orderly	Doctor	Housekeeping	Ward Secretary	Head Nurse or Dept. Supervisor	Another Appropriate Department	O.R. Circulator	O.R. Scrub Tech.
25. (a) Assist in moving post-operative patient from operating table to litter	R.N.	---	---	100.0	---	---	---	25.0	100.0	100.0
	Tech.	---	---	71.5	---	---	---	---	85.8	85.8
	Aide	---	---	---	---	---	---	---	100.0	100.0
(b) Assist in moving litter to recovery room.	R.N.	---	---	75.0	---	---	---	25.0	100.0	25.0
	Tech.	---	---	---	---	---	---	85.8	100.0	---
	Aide	---	---	---	---	---	---	---	100.0	100.0
26. Keep track of needles and instruments used during operation.	R.N.	---	---	---	---	---	---	---	---	100.0
	Tech.	---	---	---	---	---	---	---	---	100.0
	Aide	---	---	---	---	---	---	---	100.0	100.0
27. Assist in sponge count after operation.	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	---	---	---	---	---	86.0	100.0
	Aide	---	---	---	---	---	---	---	100.0	100.0
28. (a) Hand instruments and supplies to surgeon	R.N.	---	---	---	---	---	---	---	---	100.0
	Tech.	---	---	---	---	---	---	---	---	100.0
	Aide	---	---	---	---	---	---	----	100.0	100.0
(b) Hold retractors	R.N.	---	---	---	---	---	---	---	---	100.0
	Tech.	---	---	42.9	---	---	---	---	---	100.0
	Aide	---	---	---	---	---	---	---	100.0	100.0
(c) Cut sutures as directed during operation.	R.N.	---	---	---	---	---	---	---	---	100.0
	Tech.	---	---	57.2	---	---	---	---	---	100.0
	Aide	---	---	---	---	---	---	---	100.0	100.0
29. Assist surgeon or anesthesiologist in administering:										
(a) Plasma	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	---	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	100.0	100.0
(b) Blood	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	---	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	100.0	100.0
(c) Glucose	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	---	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	100.0	100.0
(d) Medications or other injections or transfusions during operation.	R.N.	---	---	---	---	---	---	---	100.0	---
	Tech.	---	---	14.3	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	100.0	100.0
30. Assist surgical team in case of patient's cardiac arrest: (a) Assist in passing instruments	R.N.	---	---	---	---	---	---	---	25.0	100.0
	Tech.	---	---	---	---	---	---	---	---	100.0
	Aide	---	---	---	---	---	---	---	100.0	100.0
(b) Bring in, assemble equipment	R.N.	---	---	25.0	---	---	---	---	100.0	25.0
	Tech.	---	---	16.6	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	100.0	100.0
(c) Operate equipment	R.N.	---	---	25.0	---	---	---	---	100.0	25.0
	Tech.	---	---	16.6	---	---	---	---	100.0	---
	Aide	---	---	---	---	---	---	---	100.0	100.0

Table No. 21 Percentage Distribution of Operating Room Personnel's Response to "Who Usually Performs This Function?"

	FUNCTIONS	Respondents	Nurses' Aide	Orderly	Doctor	Housekeeping	Ward Secretary	Head Nurse or Dept. Supervisor	Another Appropriate Department	O.R. Circulator	O.R. Scrub Tech.
	(d) Draw up medications.	R.N.	---	---	25.0	---	---	---	---	100.0	25.0
		Tech.	---	---	16.6	---	---	---	---	100.0	---
		Aide	---	---	---	---	---	---	---	100.0	100.
31.	Check or double check patient's chart upon his or her arrival to the Operating Room area to be sure lab work is done, his operative permit is signed, pre-operative medication has been given, and so on.	R.N.	---	---	---	---	---	100.0	---	75.0	---
		Tech.	---	---	---	---	---	66.7	---	66.7	---
		Aide	---	---	---	---	---	---	---	100.0	---
32.	Book operations in conjunction with anesthesiology.	R.N.	---	---	---	---	25.0	25.0	50.0	---	---
		Tech.	---	---	---	---	25.0	100.0	25.0	---	---
		Aide	---	---	---	---	---	---	---	---	---
33.	Schedule and assign personnel to scrub, to circulate, or to assist in operating rooms.	R.N.	---	---	---	---	---	100.0	---	---	---
		Tech.	---	---	---	---	---	100.0	---	---	---
		Aide	---	---	---	---	---	---	---	---	---
34.	Inspect Operating Rooms and work rooms for order and cleanliness.	R.N.	25.0	---	---	---	---	100.0	---	25.0	25.0
		Tech.	---	---	---	---	---	83.4	---	---	16.6
		Aide	---	---	---	---	---	---	---	---	---
35.	Orient and train new employees.	R.N.	---	---	---	---	---	100.0	---	25.0	25.0
		Tech.	---	---	---	---	---	71.5	---	42.9	42.9
		Aide	100.0	---	---	---	---	100.0	---	100.0	100.
36.	Supervise and evaluate quality of the work done by operating room personnel.	R.N.	---	---	---	---	---	100.0	---	---	---
		Tech.	---	---	---	---	---	100.0	---	---	---
		Aide	---	---	---	---	---	---	---	---	---
37.	Supervise maintenance of records.	R.N.	---	---	---	---	---	100.0	---	---	---
		Tech.	---	---	---	---	---	100.0	---	---	---
		Aide	---	---	---	---	---	---	---	---	---
38.	Investigate and adjust complaints and problems.	R.N.	---	---	---	---	---	100.0	---	---	---
		Tech.	---	---	---	---	---	100.0	---	---	---
		Aide	---	---	---	---	---	---	---	---	---
39.	Other **functions.**	R.N.	---	---	---	---	---	---	---	100.0	---
		Tech.	---	---	---	---	---	---	---	---	---
		Aide	---	---	---	---	---	---	---	---	---
40.	Research.	R.N.	---	---	---	---	---	---	---	---	---
		Tech.	---	---	---	---	---	---	---	---	---
		Aide	---	---	---	---	---	---	---	---	---
41.	Teaching.	R.N.	---	---	---	---	---	---	---	100.0	100.
		Tech.	---	---	---	---	---	---	---	100.0	---
		Aide	---	---	---	---	---	---	---	---	---
42.	Waiting **for** work.	R.N.	---	---	---	---	---	---	---	---	---
		Tech.	---	---	---	---	---	---	---	---	---
		Aide	---	---	---	---	---	---	---	---	---

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	NURSES' AIDE	ORDERLY	HOUSEKEEPING	HEAD NURSE OR DEPT. SUPERVISOR	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
1. Clean the following: a. Dirty work rooms	R.N.	100.0	----	100.0	----	----	----
	TECH.	57.2	28.6	85.8	----	----	----
	AIDE	100.0	----	----	----	----	----
b. Lavatories	R.N.	100.0	----	100.0	----	----	----
	TECH.	42.9	28.6	100.0	----	----	----
	AIDE	----	----	100.0	----	----	----
c. Halls	R.N.	100.0	----	100.0	----	----	----
	TECH.	42.9	28.6	100.0	----	----	----
	AIDE	----	----	100.0	----	----	----
d. Lounges	R.N.	100.0	----	100.0	----	----	----
	TECH.	42.9	28.6	100.0	----	----	----
	AIDE	----	----	100.0	----	----	----
e. Litters.	R.N.	100.0	----	100.0	----	----	----
	TECH.	57.2	28.6	85.8	----	----	----
	AIDE	----	----	100.0	----	----	----
2. a. Clean operating room area and equipment	R.N.	75.0	----	100.0	----	----	----
	TECH.	57.2	----	71.5	----	----	14.3
	AIDE	100.0	----	100.0	----	----	----
b. Rewrap equipment to be sent to Central Supply	R.N.	100.0	----	----	----	75.0	75.0
	TECH.	71.5	----	28.6	----	85.8	85.8
	AIDE	100.0	----	----	----	----	----
c. Remake room for next operation.	R.N.	100.0	----	25.0	----	25.0	25.0
	TECH.	42.9	----	71.5	----	----	----
	AIDE	----	----	100.0	----	----	----
3. Care for used instruments after operation in the following ways: a. Account for them	R.N.	25.0	----	----	----	----	75.0
	TECH.	33.3	----	33.3	----	33.3	83.4
	AIDE	----	----	----	----	----	----

Table No. 22 Percentage Distribution of Operating Room Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	NURSES' AIDE	ORDERLY	HOUSEKEEPING	HEAD NURSE OR DEPT. SUPERVISOR	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
b. Clean	R.N. TECH. AIDE	25.0 33.3 100.0	---- ---- ----	---- ---- ----	---- ---- ----	---- 33.3 ----	75.0 83.4 ----
c. Rewrap	R.N. TECH. AIDE	25.0 50.0 100.0	---- ---- ----	---- ---- ----	---- ---- ----	---- 33.3 ----	75.0 66.7 ----
d. Autoclave.	R.N. TECH. AIDE	25.0 50.0 ----	---- ---- ----	---- ---- ----	---- ---- ----	---- 33.3 ----	75.0 66.7 100.0
4. Use autoclave to sterilize instruments during operation.	R.N. TECH. AIDE	---- 14.3 ----	---- ---- ----	---- ---- ----	---- ---- ----	100.0 71.5 100.0	---- 42.9 ----
5. a. Order supplies from storeroom or Central Supply	R.N. TECH. AIDE	75.0 100.0 100.0	---- ---- ----	---- ---- ----	50.0 14.3 ----	---- 14.3 ----	---- ---- ----
b. Receive supplies	R.N. TECH. AIDE	100.0 100.0 100.0	---- ---- ----	---- ---- ----	---- ---- ----	---- ---- ----	---- ---- ----
c. Arrange them on shelves in proper storage position.	R.N. TECH. AIDE	100.0 100.0 100.0	---- 14.3 ----	---- ---- ----	---- ---- ----	---- 57.2 ----	---- 57.2 ----
6. a. Check supplies and equipment after operation	R.N. TECH. AIDE	75.0 14.3 ----	---- ---- ----	---- ---- ----	---- ---- ----	100.0 85.8 ----	100.0 100.0 ----
b. Restock cabinets if necessary	R.N. TECH. AIDE	75.0 14.3 ----	---- ---- ----	---- ---- ----	---- ---- ----	100.0 85.8 ----	100.0 100.0 ----

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	NURSES' AIDE	ORDERLY	HOUSEKEEPING	WARD SECRETARY	ANOTHER APPROPR. DEPARTMENT	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
c. Check for outdated supplies.	R.N.	75.0	----	----	----	----	75.0	75.0
	TECH.	14.3	----	----	----	----	85.8	100.0
	AIDE	----	----	----	----	----	----	----
7. a. Type out schedules for the following day	R.N.	----	----	----	100.0	----	----	----
	TECH.	----	----	----	100.0	----	----	----
	AIDE	----	----	----	----	----	----	----
b. List daily operations and daily patients.	R.N.	----	----	----	100.0	----	----	----
	TECH.	----	----	----	100.0	----	----	----
	AIDE	----	----	----	----	----	----	----
8. a. Make out list of supplies used during operation	R.N.	----	----	----	----	----	100.0	----
	TECH.	----	----	----	----	----	100.0	14.3
	AIDE	----	----	----	----	----	----	----
b. Make out and record charges to patients	R.N.	----	----	----	----	----	100.0	----
	TECH.	----	----	----	----	----	100.0	14.3
	AIDE	----	----	----	----	----	----	----
c. Distribute this information to the appropriate departments.	R.N.	----	----	----	75.0	----	25.0	----
	TECH.	----	----	----	85.8	----	14.3	----
	AIDE	----	----	----	----	----	----	----
9. Take dictation and type correspondence as necessary.	R.N.	----	----	----	100.0	----	----	----
	TECH.	----	----	----	100.0	----	----	----
	AIDE	----	----	----	----	----	----	----
10. a. Answer phone calls and notify appropriate personnel	R.N.	----	----	----	100.0	----	25.0	----
	TECH.	----	----	----	100.0	----	----	----
	AIDE	100.0	----	----	100.0	----	100.0	100.0
b. Make phone calls as requested (including calling in medication orders to the floor, one hour preceding surgery).	R.N.	----	----	----	100.0	----	25.0	----
	TECH.	14.3	----	----	100.0	----	28.6	14.3
	AIDE	100.0	----	----	100.0	----	100.0	100.0
11. Keep clean, but unsterile equipment or instruments, dust free.	R.N.	50.0	----	----	----	----	75.0	75.0
	TECH.	42.9	----	14.3	----	----	57.2	57.2
	AIDE	----	----	----	----	----	100.0	100.0

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	NURSES' AIDE	ORDERLY	DOCTOR	HOUSEKEEPING	WARD SECRETARY	ANOTHER APPROPR. DEPARTMENT	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
12. Go to surgical floor to pick up pre-operative patient by litter.	R.N.	----	100.0	----	----	----	25.0	----	----
	TECH.	----	100.0	----	----	----	----	----	42.9
	AIDE	----	----	----	----	----	----	----	----
13. Prepare surgical kits for upcoming operations: a. Select, gather instruments	R.N.	100.0	----	----	----	----	----	----	----
	TECH.	100.0	----	----	----	----	----	----	----
	AIDE	100.0	----	----	----	----	----	----	----
b. Put them on cart to be picked up by Central Supply.	R.N.	100.0	----	----	----	----	----	----	----
	TECH.	100.0	----	----	----	----	----	----	----
	AIDE	100.0	----	----	----	----	----	----	----
14. Wash and shave operative area of patient going to the surgical floor prior to the operation.	R.N.	100.0	25.0	----	----	----	----	----	75.0
	TECH.	42.9	71.5	----	----	----	----	----	----
	AIDE	100.0	----	----	----	----	----	----	----
15. a. Wash	R.N.	----	----	100.0	----	----	----	50.0	50.0
	TECH.	----	----	42.9	----	----	----	42.9	71.5
	AIDE	----	----	----	----	----	----	100.0	100.0
b. Shave	R.N.	----	----	50.0	----	----	----	75.0	50.0
	TECH.	----	----	71.5	----	----	----	28.6	57.2
	AIDE	----	----	----	----	----	----	100.0	100.0
c. Assist in sterilizing the operative area when the patient is properly positioned on the table.	R.N.	----	----	100.0	----	----	----	25.0	50.0
	TECH.	----	----	85.8	----	----	----	28.6	42.9
	AIDE	----	----	----	----	----	----	100.0	100.0
16. Place equipment and instruments in the operating room for the upcoming operations and arrange them according to the requirements of the operation.	R.N.	----	----	----	----	----	----	100.0	75.0
	TECH.	----	----	----	----	----	----	85.8	100.0
	AIDE	----	----	----	----	----	----	100.0	100.0

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	NURSES' AIDE	ORDERLY	DOCTOR	HOUSEKEEPING	WARD SECRETARY	ANOTHER APPROPR. DEPARTMENT	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
17. a. Move patient onto operating room table from litter	R.N.	----	----	----	----	----	----	100.0	25.0
	TECH.	----	----	----	----	----	----	100.0	28.6
	AIDE	----	----	----	----	----	----	100.0	100.0
b. Position, secure, and drape patient as necessary.	R.N.	----	----	25.0	----	----	----	100.0	50.0
	TECH.	----	----	57.2	----	----	----	85.8	71.5
	AIDE	----	----	----	----	----	----	100.0	100.0
18. Aid surgical team to don gown and gloves.	R.N.	----	----	----	----	----	----	100.0	100.0
	TECH.	----	----	----	----	----	----	57.2	100.0
	AIDE	----	----	----	----	----	----	----	100.0
19. Adjust the following during operation: a. Lights	R.N.	----	----	----	----	----	----	100.0	50.0
	TECH.	----	----	28.6	----	----	----	71.5	71.5
	AIDE	----	----	----	----	----	----	100.0	100.0
b. Suction	R.N.	----	----	----	----	----	----	100.0	50.0
	TECH.	----	----	14.3	----	----	----	71.5	85.8
	AIDE	----	----	----	----	----	----	100.0	100.0
c. Oxygen equipment	R.N.	----	----	----	----	----	100.0	----	----
	TECH.	----	----	----	----	----	100.0	----	----
	AIDE	----	----	----	----	----	100.0	----	----
d. Tables.	R.N.	----	----	----	----	----	----	75.0	50.0
	TECH.	----	----	----	----	----	42.9	42.9	57.2
	AIDE	----	----	----	----	----	----	100.0	100.0
20. Leave operating room during operation: a. To obtain additional supplies, instruments	R.N.	----	----	----	----	----	----	100.0	----
	TECH.	----	----	----	----	----	----	100.0	14.3
	AIDE	----	----	----	----	----	----	----	----
b. To order additional units of blood, glucose, plasma, or saline	R.N.	----	----	----	----	----	----	100.0	----
	TECH.	----	----	----	----	----	----	100.0	14.3
	AIDE	----	----	----	----	----	----	----	----

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	DOCTOR	ANOTHER DEPARTMENT	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
c. Arrange to have an X-ray or a lab test done.	R.N.	----	----	100.0	----
	TECH.	----	----	100.0	14.3
	AIDE	----	----	----	----
21. Obtain a culture during an operation.	R.N.	100.0	----	100.0	100.0
	TECH.	85.8	----	100.0	85.8
	AIDE	----	----	----	----
22. Accept, label, and record all specimens received from surgeon.	R.N.	50.0	----	100.0	50.0
	TECH.	28.6	----	100.0	57.2
	AIDE	----	----	----	----
23. Set up and adjust a cautery under surgeon's directions.	R.N.	----	----	100.0	----
	TECH.	----	----	100.0	28.6
	AIDE	----	----	100.0	100.0
24. Care for a deceased person: a. Notify appropriate personnel	R.N.	25.0	----	100.0	100.0
	TECH.	----	----	100.0	100.0
	AIDE	----	----	100.0	100.0
b. Tie and pad person	R.N.	25.0	----	100.0	100.0
	TECH.	----	----	100.0	100.0
	AIDE	----	----	100.0	100.0
c. Remove IV's and dressings	R.N.	25.0	----	100.0	100.0
	TECH.	----	----	100.0	100.0
	AIDE	----	----	100.0	100.0
d. Take person to morgue.	R.N.	25.0	----	100.0	100.0
	TECH.	----	----	100.0	100.0
	AIDE	----	----	100.0	100.0
25. a. Assist in moving post-operative patient from operating table to litter.	R.N.	100.0	25.0	100.0	100.0
	TECH.	85.8	----	85.8	85.8
	AIDE	----	----	100.0	100.0
b. Assist in moving litter to recovery room.	R.N.	75.0	25.0	100.0	25.0
	TECH.	----	85.8	100.0	----
	AIDE	----	----	100.0	100.0

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	NURSES' AIDE	DOCTOR	WARD SECRETARY	HEAD NURSE OR DEPT. SUPERVISOR	ANOTHER APPROPR. DEPARTMENT	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
26. Keep track of needles and instruments used during operation.	R.N.	----	----	----	----	----	----	100.0
	TECH.	----	----	----	----	----	----	100.0
	AIDE	----	----	----	----	----	100.0	100.0
27. Assist in sponge count after operation.	R.N.	----	----	----	----	----	100.0	----
	TECH.	----	----	----	----	----	57.2	100.0
	AIDE	----	----	----	----	----	100.0	100.0
28. a. Hand instruments and supplies to surgeon	R.N.	----	----	----	----	----	----	100.0
	TECH.	----	----	----	----	----	----	100.0
	AIDE	----	----	----	----	----	100.0	100.0
b. Hold retractors	R.N.	----	----	----	----	----	----	100.0
	TECH.	----	28.6	----	----	----	----	85.8
	AIDE	----	----	----	----	----	100.0	100.0
c. Cut sutures as directed during operation.	R.N.	----	----	----	----	----	----	100.0
	TECH.	----	42.9	----	----	----	----	85.8
	AIDE	----	----	----	----	----	100.0	100.0
29. Assist surgeon or anaesthesiologist in administering:								
a. Plasma	R.N.	----	----	----	----	----	100.0	25.0
	TECH.	----	----	----	----	----	100.0	----
	AIDE	----	----	----	----	----	100.0	100.0
b. Blood	R.N.	----	----	----	----	----	100.0	25.0
	TECH.	----	----	----	----	----	100.0	----
	AIDE	----	----	----	----	----	100.0	100.0
c. Glucose	R.N.	----	----	----	----	----	100.0	25.0
	TECH.	----	----	----	----	----	100.0	----
	AIDE	----	----	----	----	----	100.0	100.0
d. Medications or other injections or transfusion during operation.	R.N.	----	----	----	----	----	100.0	25.0
	TECH.	----	16.6	----	----	----	100.0	----
	AIDE	----	----	----	----	----	100.0	100.0

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	NURSES' AIDE	DOCTOR	WARD SECRETARY	HEAD NURSE OR DEPT. SUPERVISOR	ANOTHER APPROPR. DEPARTMENT	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
30. Assist surgical team in case of patient's cardiac arrest: a. Assist in passing instruments	R.N.	----	----	----	----	----	50.0	75.0
	TECH.	----	----	----	----	----	----	100.0
	AIDE	----	----	----	----	----	100.0	100.0
b. Bring in, assemble equipment	R.N.	----	25.0	----	----	----	100.0	25.0
	TECH.	----	16.6	----	----	----	100.0	----
	AIDE	----	----	----	----	----	100.0	100.0
c. Operate equipment	R.N.	----	25.0	----	----	----	100.0	25.0
	TECH.	----	16.6	----	----	----	100.0	----
	AIDE	----	----	----	----	----	100.0	100.0
d. Draw up medications.	R.N.	----	25.0	----	----	----	100.0	25.0
	TECH.	----	16.6	----	----	----	100.0	----
	AIDE	----	----	----	----	----	100.0	100.0
31. Check or double check patient's chart upon his or her arrival to the operating room area to be sure lab work is done, his operative permit is signed, pre-operative medications have been given and so on.	R.N.	----	----	----	100.0	----	100.0	----
	TECH.	----	----	----	66.7	----	66.7	----
	AIDE	----	----	----	----	----	100.0	----
32. Book operations in conjunction with anesthesiology.	R.N.	----	----	25.0	50.0	25.0	----	----
	TECH.	----	----	25.0	100.0	25.0	----	----
	AIDE	----	----	----	----	----	----	----
33. Schedule and assign personnel to scrub, to circulate, or to assist in operating rooms.	R.N.	----	----	----	100.0	----	----	----
	TECH.	----	----	----	100.0	----	----	----
	AIDE	----	----	----	----	----	----	----
34. Inspect operating rooms and workrooms for order and cleanliness.	R.N.	25.0	----	----	100.0	----	25.0	25.0
	TECH.	----	----	----	100.0	----	----	----
	AIDE	----	----	----	----	----	----	----
35. Orient and train new employees.	R.N.	----	----	----	100.0	----	25.0	25.0
	TECH.	----	----	----	100.0	----	40.0	40.0
	AIDE	100.0	----	----	100.0	----	100.0	100.0

Table No. 22 Percentage Distribution of Operating Room Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	HEAD NURSE OR DEPARTMENT SUPERV.	O.R. CIRCULATOR	O.R. SCRUB TECHNICIAN
36. Supervise and evaluate quality of the work done by operating room personnel.	R.N.	100.0	----	----
	TECH.	100.0	----	----
	AIDE	----	----	----
37. Supervise maintenance of records.	R.N.	100.0	----	----
	TECH.	100.0	----	----
	AIDE	----	----	----
38. Investigate and adjust complaints and problems.	R.N.	100.0	----	----
	TECH.	100.0	----	----
	AIDE	----	----	----
39. Other functions.	R.N.	----	100.0	----
	TECH.	----	----	----
	AIDE	----	----	----
0. Research.	R.N.	----	----	----
	TECH.	----	----	----
	AIDE	----	----	----
1. Teaching.	R.N.	----	100.0	100.0
	TECH.	----	----	----
	AIDE	----	----	----
2. Waiting for work.	R.N.	----	----	----
	TECH.	----	----	----
	AIDE	----	----	----

Table No. 23 Percentage of Registered Nurses and Psychiatric Attendants Performing Each Function[1] in the Psychiatry Department

FUNCTIONS	R. N.			PSYCHIATRIC ATTENDANT		
	% Performing Function	% Not Performing Function	% Where Function is Not Applicable	% Performing Function	% Not Performing Function	% Where Function is Not Applicable
1. a. Answering telephone	100.0	---	---	100.0	---	---
b. Taking messages, notifying appropriate personnel	100.0	---	---	100.0	---	---
c. Giving information or directions	100.0	---	---	100.0	---	---
d. Making phone calls.	100.0	---	---	100.0	---	---
2. Taking and recording:						
a. Temperature	100.0	---	---	80.0	20.0	---
b. Pulse	100.0	---	---	80.0	20.0	---
c. Respiration rates	100.0	---	---	80.0	20.0	---
d. Blood pressure	100.0	---	---	80.0	20.0	---
e. Weight.	66.7	---	33.3	80.0	20.0	---
3. a. Collecting urine specimens	100.0	---	---	60.0	20.0	20.0
b. Taking specimens to lab	100.0	---	---	60.0	20.0	20.0
c. Taking patient to X-ray.	66.7	33.3	---	80.0	---	20.0
4. Admitting new ward patients.	100.0	---	---	60.0	40.0	---
5. Assisting in transferring patient to or bringing patient from another floor.	100.0	---	---	80.0	---	20.0

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[1] May not add to 100 percent because of rounding.

Table No. 23 Percentage of Registered Nurses and Psychiatric Attendants Performing Each Function[1] in the Psychiatry Department

FUNCTIONS	R. N.			PSYCHIATRIC ATTENDANT		
	% Performing Function	% Not Performing Function	% Where Function is Not Applicable	% Performing Function	% Not Performing Function	% Where Function is Not Applicable
6. Doing errands for department staff:						
a. Going to Cental Supply	100.0	---	---	80.0	20.0	---
b. Going to laundry	---	100.0	---	---	100.0	---
c. Going to various departments or floors to obtain equipment, supplies.	100.0	---	---	100.0	---	---
7. Maintaining daily or weekly progress notes on selected in-patients and out-patients.	100.0	---	---	80.0	---	20.0
8. Talking with patient's family casually or professionally, helping them to understand patient's condition, feelings, progress, problems, therapy.	100.0	---	---	100.0	---	---
9. a. Knowing where any ward patient is at any given time	100.0	---	---	80.0	20.0	---
b. Checking on his condition casually or formally and frequently (as with a suicidal patient).	100.0	---	---	100.0	---	---
0. Supervising, evaluating, and making recommendations about a patient with "outside hospital" privileges.	100.0	---	---	40.0	40.0	20.0

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[1] May not add to 100 percent because of rounding.

Table No. 23 Percentage of Registered Nurses and Psychiatric Attendants Performing Each Function[1] in the Psychiatry Department

FUNCTIONS	R. N.			PSYCHIATRIC ATTENDANT		
	% Performing Function	% Not Performing Function	% Where Function is Not Applicable	% Performing Function	% Not Performing Function	% Where Function is Not Applicable
11. Observing and reporting to Head Nurse or psychiatrist patient's mood changes, reactions, and significant incidents.	100.0	---	---	100.0	---	---
12. a. Assisting in planning a specific therapy for a patient	100.0	---	---	80.0	---	20.0
b. Implementing the plan	100.0	---	---	80.0	---	20.0
c. Motivating or encouraging patient to accept or involve himself in the therapy.	100.0	---	---	80.0	---	20.0
13. a. Going to the emergency ward to evaluate a patient	100.0	---	---	100.0	---	---
b. Notifying psychiatrist and discussing results with him.	100.0	---	---	100.0	---	---
14. Assisting patients with occupational therapy.	33.3	66.7	---	80.0	---	20.0
15. a. Carrying out individual therapy with patient	100.0	---	---	80.0	---	20.0
b. Discussing results, problems, and progress with assigned supervisor afterwards.	100.0	---	---	80.0	---	20.0

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[1] May not add to 100 percent because of rounding.

Table No. 23 Percentage of Registered Nurses and Psychiatric Attendants Performing Each Function[1] in the Psychiatry Department

FUNCTIONS	R. N.			PSYCHIATRIC ATTENDANT		
	% Performing Function	% Not Performing Function	% Where Function is Not Applicable	% Performing Function	% Not Performing Function	% Where Function is Not Applicable
16. Participating in weekly community meeting with all in-patients.	66.7	33.3	---	60.0	40.0	---
17. Participating in group therapy sessions.	---	100.0	---	40.0	60.0	---
18. Responding to a call from any part of the hospital to go there and:						
a. Restrain	66.7	33.3	---	60.0	---	40.0
b. Manage	66.7	33.3	---	60.0	---	40.0
c. Evaluate	100.0	---	---	---	80.0	20.0
d. Treat a medical surgical patient.	100.0	---	---	---	80.0	20.0
19. Teaching medical or surgical staff in any part of the hospital how to handle, deal with, react to, or help one of their patients.	100.0	---	---	80.0	---	20.0
20. Community work.	33.3	66.7	---	20.0	80.0	---
21. Home visits.	66.7	33.3	---	40.0	60.0	---
22. Coordinating psychiatric care of all patients.	33.3	66.7	---	40.0	60.0	---
23. Giving approval to any therapy treatment or project.	33.3	66.7	---	---	100.0	---

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[1] May not add to 100 percent because of rounding

Table No. 23 Percentage of Registered Nurses and Psychiatric Attendants Performing Each Function[1] in the Psychiatry Department

FUNCTIONS	R. N.			PSYCHIATRIC ATTENDANT		
	% Performing Function	% Not Performing Function	% Where Function is Not Applicable	% Performing Function	% Not Performing Function	% Where Function is Not Applicable
24. a. Functioning as a co-therapist or primary therapist	100.0	---	---	40.0	40.0	20.0
b. Carrying out intensive therapy (as opposed to supportive therapy).	100.0	---	---	20.0	60.0	20.0
25. Evaluating quality of work done by nurses and attendants.	100.0	---	---	20.0	80.0	---
26. Investigating and adjusting complaints and problems.	100.0	---	---	80.0	20.0	---
27. a. Developing plans for the expansion of the department	66.7	33.3	---	---	100.0	---
b. Participating in administrative meetings concerned with hospital problems or policies.	66.7	33.3	---	---	100.0	---
28. Teaching.	100.0	---	---	60.0	40.0	---
29. Research.	33.3	---	66.7	---	---	100.0
30. Waiting for work.	100.0	---	---	80.0	20.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 23 Percentage of Registered Nurses and Psychiatric Attendants Performing Each Function[1] in the Psychiatry Department

FUNCTIONS	R. N.			PSYCHIATRIC ATTENDANT		
	% Performing Function	% Not Performing Function	% Where Function is Not Applicable	% Performing Function	% Not Performing Function	% Where Function is Not Applicable
31. Other functions:						
a. Giving medications	100.0	---	---	40.0	60.0	---
b. Giving change-of-shift report	100.0	---	---	40.0	60.0	---
c. Straightening up the area	66.7	33.3	---	60.0	40.0	---
d. Giving routine morning care.	100.0	---	---	60.0	40.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 24

Percentage of Registered Nurses and Psychiatric Attendants in the Psychiatry Department Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		ATTENDANT	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentag of Total Working Time Spen on Functi
1. Answering telephone; taking messages, giving information or directions, making phone calls.	100.0	4.7	100.0	5.5
2. Taking and recording temperature, pulse, respiration rates, blood pressure, weight.	100.0	2.2	80.0	0.5
3. Collecting urine specimens; taking specimens to lab; taking patient to X-ray.	100.0	3.0	80.0	1.9
4. Admitting new ward patients.	100.0	2.2	60.0	1.3
5. Assisting in transferring patient to or bringing patient from another floor.	100.0	1.3	80.0	0.5
6. Doing errands for department staff.	100.0	0.5	100.0	0.5
7. Maintaining daily or weekly progress notes on selected in-patients and out-patients.	100.0	6.3	80.0	3.0
8. Talking with patient's family casually or professionally, helping them to understand patient's condition, feelings, progress, problems, therapy.	100.0	3.0	100.0	3.5
9. Knowing where any ward patient is at any given time; checking on his condition casually or formally and frequently (as with a suicidal patient).	100.0	0.5	100.0	3.5
10. Supervising, evaluating, and making recommendations about a patient with "outside hospital" privileges.	100.0	3.0	40.0	0.5

Table No. 24 Percentage of Registered Nurses and Psychiatric Attendants in the Psychiatry Department Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		ATTENDANT	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions
11. Observing and reporting to Head Nurse or psychiatrist patient's mood changes, reactions, and significant incidents.	100.0	3.0	100.0	6.0
12. Assisting in planning a specific therapy for a patient; implementing the plan; motivating or encouraging patient to accept or involve himself in the therapy.	100.0	8.0	80.0	4.3
13. Going to the Emergency Room to evaluate a patient; notifying psychiatrist and discussing results with him.	100.0	9.7	100.0	4.0
14. Assisting patients with occupational therapy.	33.3	5.0	80.0	14.8
15. Carrying out individual therapy with patient; discussing results, problems, and progress with supervisor afterwards.	100.0	17.7	80.0	6.3
16. Participating in weekly community meeting with all in-patients.	66.7	3.0	60.0	3.0
17. Participating in group therapy sessions.	----	----	40.0	3.0
18. Responding to a call from any part of the hospital.	100.0	0.5	60.0	1.8
19. Teaching medical or surgical staff in any part of the hospital how to handle, deal with, react to, or help one of their patients.	100.0	0.5	80.0	1.8

Table No. 24 Percentage of Registered Nurses and Psychiatric Attendants in the Psychiatry Department Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	R.N.		ATTENDANT	
	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Functions	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Function
20. Community work.	33.3	20.0	20.0	0.5
21. Home visits.	66.7	0.5	40.0	0.5
22. Coordinating psychiatric care of all patients.	33.3	0.5	40.0	6.8
23. Giving approval to any therapy treatment or project.	33.3	0.5	----	----
24. Functioning as a co-therapist or primary therapist; carrying out intensive therapy (as opposed to supportive therapy).	100.0	3.0	40.0	3.0
25. Evaluating quality of work done by nurses and attendants.	100.0	1.3	20.0	0.5
26. Investigating and adjusting complaints and problems.	100.0	2.2	80.0	1.8
27. Developing plans for the expansion of the department; participating in administrative meetings concerned with hospital problems or policies.	100.0	0.5	----	----
28. Teaching.	100.0	0.5	60.0	4.7
29. Research. (1 RN will begin performing this function.)	33.3	----	----	----
30. Waiting for work.	100.0	8.0	80.0	19.0
31. Other functions:				
a. Giving medications	100.0	11.3	40.0	0.5
b. Change-of-shift report	100.0	8.0	40.0	3.0
c. Routine morning care	66.7	1.8	60.0	6.0
d. Straightening up the area.	100.0	0.5	60.0	3.0

Table No. 25 **Percentage Distribution of Psychiatry Department Personnel's Response to "Who Usually Performs This Function?"**

FUNCTIONS	Respondents	R.N.	L.P.N.	Doctor	Housekeeping	Ward Secretary	Another Appropriate Department	Psychiatry Attendant
1. a. Answering telephone	R.N.	---	---	---	---	100.0	---	---
	Att.	20.0	20.0	---	---	80.0	---	40.0
b. Taking messages, notifying appropriate personnel	R.N.	---	---	---	---	100.0	---	---
	Att.	20.0	20.0	---	---	80.0	---	40.0
c. Giving information or directions	R.N.	33.3	33.3	---	---	66.7	---	33.3
	Att.	40.0	40.0	---	---	60.0	---	60.0
d. Making phone calls.	R.N.	66.7	66.7	---	---	66.7	---	66.7
	Att.	20.0	20.0	---	---	80.0	---	40.0
2. Taking and recording: a. Temperature	R.N.	100.0	100.0	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	60.0
b. Pulse	R.N.	100.0	100.0	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	60.0
c. Respiration rates	R.N.	100.0	100.0	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	60.0
d. Blood Pressure	R.N.	100.0	100.0	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	60.0
e. Weight.	R.N.	100.0	100.0	---	---	---	---	100.0
	Att.	100.0	100.0	---	---	---	---	60.0
3. a. Collecting urine specimens	R.N.	66.7	66.7	---	---	33.3	---	100.0
	Att.	20.0	20.0	---	---	---	20.0	80.0
b. Taking specimens to lab	R.N.	---	---	---	---	100.0	---	---
	Att.	---	---	---	---	40.0	---	60.0

Table No. 25 Percentage Distribution of Psychiatry Department Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	R.N.	L.P.N.	Doctor	Housekeeping	Ward Secretary	Another Appropriate Department	Psychiatry Attendant
c. Taking patient to X-ray.	R.N. Att.	--- ---	--- ---	--- ---	--- ---	--- ---	--- ---	100.0 100.0
4. Admitting new ward patients.	R.N. Att.	100.0 80.0	100.0 80.0	33.3 60.0	--- ---	--- ---	--- ---	66.7 60.0
5. Assisting in transferring patient to or bringing patient from another floor.	R.N. Att.	100.0 60.0	100.0 60.0	33.3 40.0	--- ---	--- ---	--- ---	100.0 100.0
6. Doing errands for department staff: a. Going to Central Supply	R.N. Att.	--- ---	--- ---	--- ---	33.3 ---	66.7 75.0	--- ---	33.3 75.0
b. Going to laundry	R.N. Att.	--- ---	--- ---	--- ---	100.0 ---	--- 60.0	--- ---	--- 80.0
c. Going to various departments or floors to obtain equipment, supplies.	R.N. Att.	33.3 ---	33.3 ---	--- ---	--- ---	66.7 40.0	--- ---	33.3 80.0
7. Maintaining daily or weekly progress notes on selected in-patients and out-patients.	R.N. Att.	100.0 100.0	100.0 100.0	--- ---	--- ---	--- ---	--- ---	100.0 100.0
8. Talking with patient's family casually or professionally, helping them to understand patient's condition, feelings, progress, problems, therapy.	R.N. Att.	100.0 80.0	100.0 80.0	33.3 40.0	--- ---	--- ---	33.3 ---	100.0 80.0
9. a. Knowing where any ward patient is at any given time	R.N. Att.	100.0 60.0	100.0 60.0	--- ---	--- ---	--- ---	--- ---	100.0 100.0
b. Checking on his condition casually or formally and frequently (as with a suicidal patient).	R.N. Att.	100.0 ---	100.0 ---	--- ---	--- ---	--- ---	--- ---	100.0 100.0
10. Supervising, evaluating and making recommendations about a patient with "outside hospital" privileges.	R.N. Att.	100.0 50.0	100.0 50.0	--- 75.0	--- ---	--- ---	--- ---	100.0 25.0

Table No. 25 Percentage Distribution of Psychiatry Department Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	R.N.	L.P.N.	Doctor	Housekeeping	Ward Secretary	Volunteer	Head Nurse or Department Supervisor	Another Appropriate Department	Psych. Attendant
11. Observing and reporting to Head Nurse or psychiatrist patient's mood changes, reactions, and significant incidents.	R.N.	100.0	100.0	---	---	---	---	---	---	100.0
	Att.	80.0	80.0	---	---	---	---	---	---	100.0
12. a. Assisting in planning a specific therapy for a patient	R.N.	100.0	100.0	---	---	---	---	---	---	66.7
	Att.	100.0	100.0	75.0	---	---	---	50.0	---	75.0
b. Implementing the plan	R.N.	100.0	100.0	---	---	---	---	---	---	100.0
	Att.	100.0	100.0	75.0	---	---	---	50.0	---	75.0
c. Motivating or encouraging patient to accept or involve himself in the therapy.	R.N.	100.0	100.0	---	---	---	---	---	---	100.0
	Att.	100.0	100.0	75.0	---	---	---	50.0	---	75.0
13. a. Going to emergency room to evaluate a patient	R.N.	100.0	100.0	---	---	---	---	---	---	33.3
	Att.	80.0	80.0	---	---	---	---	---	---	80.0
b. Notifying psychiatrist and discussing results with him.	R.N.	100.0	100.0	---	---	---	---	---	---	33.3
	Att.	80.0	80.0	---	---	---	---	---	---	100.0
14. Assisting patients with occupational therapy.	R.N.	33.3	33.3	---	---	---	33.3	---	33.3	66.7
	Att.	---	---	---	---	---	---	---	100.0	25.0
15. a. Carrying out individual therapy with patient	R.N.	100.0	100.0	33.3	---	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	---	---	100.0
b. Discussing results, problems, and progress with assigned supervisor afterwards.	R.N.	100.0	100.0	33.3	---	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	---	---	100.0
16. Participating in weekly community meeting with all in-patients.	R.N.	100.0	100.0	66.7	---	---	---	---	---	100.0
	Att.	100.0	100.0	50.0	---	---	---	---	---	100.0
17. Participating in group therapy sessions.	R.N.	---	---	66.7	---	---	---	---	---	100.0
	Att.	25.0	25.0	50.0	---	---	---	---	---	100.0
18. Responding to a call from any part of the hospital to go there and:										
a. Restrain	R.N.	33.3	33.3	---	---	---	---	---	---	66.7
	Att.	80.0	80.0	40.0	---	---	---	---	---	100.0
b. Manage	R.N.	33.3	33.3	---	---	---	---	---	---	66.7
	Att.	80.0	60.0	40.0	---	---	---	---	---	100.0

Table No. 25 Percentage Distribution of Psychiatry Department Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	R.N.	L.P.N.	Doctor	Housekeeping	Ward Secretary	Volunteer	Head Nurse or Department Supervisor	Another Appropriate Department	Psych. Attendant
c. Evaluate	R.N.	100.0	100.0	---	---	---	---	---	---	---
	Att.	60.0	60.0	60.0	---	---	---	---	---	40.0
d . Treat a medical or surgical patient.	R.N.	66.7	66.7	33.3	---	---	---	---	---	---
	Att.	80.0	60.0	60.0	---	---	---	---	---	40.0
19. Teaching medical or surgical staff in any part of the hospital how to handle, deal with, react to or help one of their patients.	R.N.	66.7	66.7	33.3	---	---	---	66.7	---	---
	Att.	60.0	60.0	20.0	---	---	---	40.0	---	40.0
20. Community work.	R.N.	100.0	50.0	---	---	---	---	---	---	50.0
	Att.	100.0	100.0	---	---	---	---	---	---	100.0
21. Home visits.	R.N.	100.0	100.0	100.0	---	---	---	---	50.0	---
	Att.	100.0	100.0	33.3	---	---	---	---	---	---
22. Coordinating psychiatric care of all patients.	R.N.	---	---	---	---	---	---	100.0	---	---
	Att.	---	---	50.0	---	---	---	75.0	---	25.0
23. Giving approval to any therapy treatment or project.	R.N.	---	---	66.7	---	---	---	66.7	---	---
	Att.	---	---	75.0	---	---	---	100.0	---	---
24. a. Functioning as a co-therapist or primary therapist	R.N.	100.0	100.0	---	---	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	---	---	100.0
b. Carrying out intensive therapy (as opposed to supportive therapy).	R.N.	100.0	100.0	33.3	---	---	---	---	---	66.7
	Att.	100.0	100.0	---	---	---	---	---	---	75.0
25. Evaluating quality of work done by nurses and attendants.	R.N.	66.7	66.7	33.3	---	---	---	100.0	---	33.3
	Att.	25.0	25.0	---	---	---	---	100.0	---	25.0
26. Investigating and adjusting complaints and problems.	R.N.	---	---	50.0	---	---	---	100.0	---	---
	Att.	25.0	25.0	---	---	---	---	100.0	---	25.0
27. a. Developing plans for the expansion of the department.	R.N.	50.0	50.0	100.0	---	---	---	50.0	---	---
	Att.	---	---	100.0	---	---	---	100.0	---	---
b. Participating in administrative meetings concerned with hospital problems or policies.	R.N.	---	---	50.0	---	---	---	100.0	---	---
	Att.	---	---	100.0	---	---	---	100.0	---	---
28. Teaching.	R.N.	---	---	100.0	---	---	---	---	---	50.0
	Att.	50.0	50.0	50.0	---	---	---	50.0	---	50.0
29. Research.	R.N.	---	---	---	---	---	---	---	---	---
	Att.	---	---	---	---	---	---	---	---	----
30. Waiting for work.	---	---	---	---	---	---	---	---	---	---
31. Other functions:										
a. Giving medications	R.N.	100.0	100.0	---	---	---	---	---	---	---
	Att.	50.0	---	---	---	---	---	50.0	---	---
b. Giving change-of-shift report	R.N.	100.0	100.0	---	---	---	---	---	---	---
	Att.	100.0	100.0	---	---	---	---	---	---	---

Table No. 25 Percentage Distribution of Psychiatry Department Personnel's Response to "Who Usually Performs This Function?"

FUNCTIONS	Respondents	R.N.	L.P.N.	Doctor	Housekeeping	Ward Secretary	Volunteer	Head Nurse or Department Supervisor	Another Appropriate Department	Psych. Attendant
c. Straightening up the area	R.N.	---	---	---	---	---	---	---	---	---
	Att.	---	---	---	---	---	---	---	---	100.0
d. Giving routine morning care.	R.N.	---	---	---	---	---	---	---	---	100.0
	Att.	100.0	100.0	---	---	---	---	---	---	100.0

Table No. 26 Percentage Distribution of Psychiatry Department Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	DOCTOR	HOUSEKEEPING	WARD SECRETARY	ANOTHER APPROPR. DEPARTMENT	PSYCHIATRY ATTENDANT
1. a. Answering telephone	R.N.	----	----	----	100.0	----	----	----
	ATT.	----	----	----	80.0	----	----	20.0
b. Taking messages, notifying appropriate personnel	R.N.	----	----	----	100.0	----	----	----
	ATT.	----	----	----	80.0	----	----	20.0
c. Giving information or directions	R.N.	100.0	100.0	----	66.7	----	----	66.7
	ATT.	20.0	20.0	----	60.0	----	----	40.0
d. Making phone calls.	R.N.	100.0	100.0	----	66.7	----	----	66.7
	ATT.	20.0	20.0	----	80.0	----	----	40.0
2. Taking and recording: a. Temperature	R.N.	100.0	100.0	----	----	----	----	33.3
	ATT.	100.0	100.0	-----	----	----	----	80.0
b. Pulse	R.N.	100.0	100.0	----	----	----	----	33.3
	ATT.	100.0	100.0	----	----	----	----	80.0
c. Respiration rates	R.N.	100.0	100.0	----	----	----	----	33.3
	ATT.	100.0	100.0	----	----	----	----	80.0
d. Blood pressure	R.N.	100.0	100.0	----	----	----	----	33.3
	ATT.	100.0	100.0	----	----	----	----	80.0
e. Weight.	R.N.	100.0	100.0	----	----	----	----	50.0
	ATT.	100.0	100.0	----	----	----	----	80.0
3. a. Collecting urine specimens	R.N.	100.0	100.0	----	66.7	----	----	100.0
	ATT.	20.0	20.0	----	----	----	20.0	80.0
b. Taking specimens to lab	R.N.	33.3	33.3	----	100.0	----	----	33.3
	ATT.	----	----	----	40.0	----	----	60.0
c. Taking patient to X-ray.	R.N.	----	----	----	----	----	----	100.0
	ATT.	----	----	----	----	----	----	100.0
4. Admitting new ward patients.	R.N.	100.0	100.0	33.3	----	----	----	66.7
	ATT.	80.0	80.0	60.0	----	----	----	60.0

Table No. 26 Percentage Distribution of Psychiatry Department Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	DOCTOR	HOUSEKEEPING	WARD SECRETARY	ANOTHER APPROPR. DEPARTMENT	PSYCHIATRY ATTENDANT
5. Assisting in transferring patient to or bringing patient from another floor	R.N.	100.0	100.0	33.3	----	----	----	100.0
	ATT.	60.0	60.0	40.0	----	----	----	100.0
6. Doing errands for department staff: a. Going to Central Supply	R.N.	----	----	----	33.3	66.7	----	33.3
	ATT.	----	----	----	----	75.0	----	75.0
b. Going to laundry	R.N.	----	----	----	100.0	----	----	----
	ATT.	----	----	----	----	60.0	----	80.0
c. Going to various departments or floors to obtain equipment, supplies.	R.N.	33.3	33.3	----	----	66.7	----	33.3
	ATT.	----	----	----	----	40.0	----	80.0
7. Maintaining daily or weekly progress notes on selected in-patients and out-patients.	R.N.	100.0	100.0	----	----	----	----	100.0
	ATT.	100.0	100.0	----	----	----	----	100.0
8. Talking with patient's family casually or professionally, helping them to understand patient's condition, feelings, progress, problems, therapy.	R.N.	100.0	100.0	33.3	----	----	33.3	100.0
	ATT.	80.0	80.0	40.0	----	----	----	100.0
9. a. Knowing where any ward patient is at any given time.	R.N.	100.0	100.0	----	----	----	----	100.0
	ATT.	60.0	60.0	----	----	----	----	100.0
b. Checking on his condition casually or formally and frequently (as with a suicidal patient).	R.N.	100.0	100.0	----	----	----	----	100.0
	ATT.	----	----	----	----	----	----	100.0
10. Supervising, evaluating and making recommendations about a patient with "outside hospital" privileges.	R.N.	100.0	100.0	----	----	----	----	100.0
	ATT.	75.0	75.0	75.0	----	----	----	50.0
11. Observing and reporting to Head Nurse or psychiatrist patient's mood changes, reactions and significant incidents.	R.N.	100.0	100.0	----	----	----	----	100.0
	ATT.	80.0	80.0	----	----	----	----	100.0

Table No. 26 Percentage Distribution of Psychiatry Department Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	DOCTOR	HOUSEKEEPING	WARD SECRETARY	ANOTHER APPROPR. DEPARTMENT	PSYCHIATRY ATTENDANT
12. a. Assisting in planning a specific therapy for a patient	R.N.	100.0	100.0	----	----	----	----	66.0
	ATT.	75.0	75.0	75.0	----	----	50.0	75.0
b. Implementing the plan	R.N.	100.0	100.0	----	----	----	----	100.0
	ATT.	75.0	75.0	75.0	----	----	50.0	75.0
c. Motivating or encouraging patient to accept or involve himself in the therapy.	R.N.	100.0	100.0	----	----	----	----	100.0
	ATT.	100.0	100.0	50.0	----	----	50.0	100.0
13. a. Going to emergency room to evaluate a patient	R.N.	100.0	100.0	----	----	----	----	33.3
	ATT.	80.0	80.0	----	----	----	----	40.0
b. Notifying psychiatrist and discussing results with him.	R.N.	100.0	100.0	----	----	----	----	33.3
	ATT.	80.0	80.0	----	----	----	----	60.0
14. Assisting patients with occupational therapy.	R.N.	66.7	66.7	----	----	----	----	----
	ATT.	25.0	25.0	----	----	----	50.0	50.0
15. a. Carrying out individual therapy with patient	R.N.	100.0	100.0	33.3	----	----	----	33.3
	ATT.	100.0	100.0	----	----	----	----	75.0
b. Discussing results, problems, and progress with assigned supervisor afterwards.	R.N.	100.0	100.0	33.3	----	----	----	33.3
	ATT.	100.0	100.0	----	----	----	----	75.0
16. Participating in weekly community meeting with all in-patients.	R.N.	100.0	100.0	66.7	----	----	----	100.0
	ATT.	100.0	100.0	50.0	----	----	----	100.0
17. Participating in group therapy sessions.	R.N.	----	----	66.7	----	----	----	100.0
	ATT.	25.0	25.0	50.0	----	----	----	100.0
18. Responding to call from any part of the hospital to go there and: a. Restrain	R.N.	33.3	33.3	----	----	----	----	66.7
	ATT.	60.0	60.0	40.0	----	----	----	80.0
b. Manage	R.N.	33.3	33.3	----	----	----	----	66.7
	ATT.	60.0	60.0	40.0	----	----	----	80.0

Table No. 26 Percentage Distribution of Psychiatry Department Personnel's Responses to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	DOCTOR	HOUSEKEEPING	WARD SECRETARY	ANOTHER APPROPR. DEPARTMENT	PSYCHIATRY ATTENDANT
c. Evaluate	R.N.	100.0	100.0	----	----	----	----	----
	ATT.	60.0	60.0	60.0	----	----	----	20.0
d. Treat a medical or surgical patient.	R.N.	66.7	66.7	33.3	----	----	----	----
	ATT.	80.0	60.0	60.0	----	----	----	20.0
19. Teaching medical or surgical staff in any part of the hospital how to handle, deal with, react to, or help one of their patients.	R.N.	66.7	66.7	33.3	----	66.7	----	----
	ATT.	60.0	60.0	20.0	----	40.0	----	60.0
20. Community work.	R.N.	100.0	----	----	----	----	----	----
	ATT.	50.0	50.0	----	----	----	----	50.0
21. Home visits.	R.N.	100.0	100.0	100.0	----	----	----	----
	ATT.	100.0	100.0	25.0	----	----	----	----
22. Coordinating psychiatric care of all patients.	R.N.	----	----	----	----	100.0	----	----
	ATT.	----	----	50.0	----	75.0	----	25.0
23. Giving approval to any therapy treatment or project.	R.N.	----	----	66.7	----	66.7	----	----
	ATT.	----	----	75.0	----	100.0	----	----
24. a. Functioning as a co-therapist or primary therapist	R.N.	100.0	100.0	----	----	----	----	66.7
	ATT.	100.0	100.0	----	----	----	----	50.0
b. Carrying out intensive therapy (as opposed to supportive therapy).	R.N.	100.0	100.0	33.3	----	----	----	66.7
	ATT.	100.0	100.0	----	----	----	----	75.0
25. Evaluating quality of work done by nurses and attendants.	R.N.	66.7	66.7	33.3	----	100.0	----	33.3
	ATT.	25.0	25.0	----	----	100.0	----	25.0
26. Investigating and adjusting complaints and problems.	R.N.	----	----	50.0	----	100.0	----	----
	ATT.	20.0	20.0	----	----	80.0	----	40.0

Table No. 26 Percentage Distribution of Psychiatry Department Personnel's Response to "Who Should Perform This Function?"

FUNCTIONS	RESPONDENTS	R.N.	L.P.N.	DOCTOR	HOUSEKEEPING	HEAD NURSE OR DEPT. SUPERVISOR	ANOTHER APPROPR. DEPARTMENT	PSYCHIATRY ATTENDANT
27. a. Developing plans for the expansion of the department	R.N. ATT.	50.0 ----	50.0 ----	100.0 100.0	---- ----	50.0 100.0	---- ----	---- ----
b. Participating in administrative meetings concerned with hospital problems or policies.	R.N. ATT.	---- ----	---- ----	50.0 100.0	---- ----	100.0 100.0	---- ----	---- ----
28. Teaching.	R.N. ATT.	---- 50.0	---- 50.0	100.0 25.0	---- ----	---- 50.0	---- ----	50.0 75.0
29. Research.	R.N. ATT.	---- ----	---- ----	---- ----	---- ----	---- ----	---- ----	---- ----
30. Waiting for work.	R.N. ATT.	---- ----	---- ----	---- ----	---- ----	---- ----	---- ----	---- ----
31. Other functions: a. Giving medications	R.N. ATT.	100.0 50.0	100.0 ----	---- ----	---- ----	---- 50.0	---- ----	33.3 ----
b. Giving change-of-shift report	R.N. ATT.	100.0 100.0	100.0 100.0	---- ----	---- ----	---- ----	---- ----	---- ----
c. Straightening up the area	R.N. ATT.	---- ----	---- ----	---- ----	---- 100.0	---- ----	---- ----	---- 100.0
d. Giving routine morning care.	R.N. ATT.	100.0 100.0	100.0 100.0	---- ----	---- ----	---- ----	---- ----	---- 100.0

Table No. 27 Percentage of X-ray Technicians Performing Each Function[1]

FUNCTIONS	X-RAY TECHNICIAN	
	Percentage Performing Function	Percentage Not Performing Function
1. Cleaning and putting away equipment and supplies.	100.0	----
2. Preparing and positioning patient on X-ray table.	100.0	----
3. Adjusting immobilization devices such as restraints or chest straps if necessary.	100.0	----
4. Protecting the area not to be X-rayed with lead shield, as with children or pregnant women.	100.0	----
5. a. Check requisitions for good clinical history	100.0	----
b. Check developed films for markers; numbers, and dates.	100.0	----
6. Booking appointments.	90.9	9.1
7. Answering phone calls, taking messages, notifying appropriate personnel.	100.0	----
8. a. Locating and supplying physicians with X-ray examinations from files	81.8	18.2
b. Putting up completed films for doctors to observe	90.9	9.1
c. Filing X-ray examinations and records.	45.5	54.5
9. a. Maintaining records of drugs, supplies, and equipment used, and X-rays taken.	18.2	81.8
b. Going to Central Supply to get routine supplies, drugs, and equipment	90.9	9.1
c. Ordering drugs , supplies or equipment outside hospital	----	100.0
d. Checking for outdated supplies; returning them to Central Supply.	63.6	36.4

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1. May not add to 100 percent because of rounding

Table No. 27 Percentage of X-ray Technicians Performing Each Function [1]

FUNCTIONS	X-RAY TECHNICIAN	
	Percentage Performing Function	Percentage Not Performing Function
10. Taking a routine X-ray including:		
a. Checking the patient's ID	100.0	----
b. Measuring the size of the patient	81.8	18.2
c. Centering the patient to the table, the film to the patient, and centering the tube on the area to be X-rayed	100.0	----
d. Inserting the cassette into the Bucky	100.0	----
e. Selecting a technique on the control panel (appropriate quantity, or milliamperage; length of exposure; penetration, or KV)	100.0	----
f. Instructing patient through microphone to take and hold a deep breath	100.0	----
g. Assisting patient in getting off table and into wheelchair, onto stretcher	100.0	----
h. Labeling X-ray film, taking it to developer.	81.8	18.2
11. Developing X-ray films:		
a. Inserting exposed film into processor	100.0	----
b. Removing developed film	100.0	----
c. Labeling, recording, or distributing film to appropriate persons	100.0	----
d. Replenishing supply of film in filming drawer.	100.0	----
12. Go to the Operating Room to take an X-ray with a portable X-ray machine, using sterile technique.	90.9	9.1
13. Go to the floors to take X-ray with a portable X-ray machine.	90.9	9.1
14. Mixing and administering (under physician's directions) barium enemas or barium meal.	100.0	----

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1. May not add to 100 percent because of rounding

Table No. 27 Percentage of X-ray Technicians Performing Each Function [1]

FUNCTIONS	X-RAY TECHNICIANS	
	Percentage Performing Function	Percentage Not Performing Function
15. Assisting physician in fluoroscope examination:		
a. Getting necessary equipment and supplies	100.0	----
b. Adjusting cameras, table, television screens, patients, and overhead and side tubes	100.0	----
c. Inserting appropriate film.	100.0	----
16. Assisting physician in special procedures (selective arteriograms, aortagrams):		
a. Getting necessary equipment and supplies	45.5	54.5
b. Adjusting cameras, table, television screens, overhead and side X-ray tubes, and the patient.	45.5	54.5
c. Inserting appropriate X-ray film into magazine	36.4	63.6
d. Checking number of needles, catheters used, and so on.	36.4	63.6
17. Teaching.	72.7	27.3
18. Waiting for work.	100.0	----

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1. May not add to 100 percent because of rounding

Table No. 28 Percentage of X-ray Technicians Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

FUNCTIONS	X-RAY TECHNICIAN Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Each Group of Functions
1. Cleaning and putting away equipment and supplies.	100.0	10.0
2. Preparing and positioning patient on X-ray table.	100.0	7.3
3. Adjusting immobilization devices.	100.0	1.2
4. Protecting the area not to be X-rayed with lead shield.	100.0	1.6
5. Check requisitions for good clinical history; check developed films for markers, numbers and dates.	100.0	3.0
6. Booking appointments.	90.9	1.0
7. Answering phone calls, taking messages, notifying appropriate personnel.	100.0	1.2
8. Locating and supplying physicians with X-ray examinations from files; putting up completed films; filing X-ray examinations and records.	90.9	1.0
9. Maintaining records of drugs, supplies and equipment used and X-rays taken; going to Central Supply; ordering drugs, supplies or equipment outside hospital; checking for outdated supplies, returning them to Central Supply.	100.0	3.0
10. Taking a routine X-ray.	100.0	28.2
11. Developing X-ray films.	100.0	2.5
12. Go to operating room to take an X-ray.	90.9	2.3
13. Go to floors to take an X-ray.	90.9	3.0

Table No. 28 Percentage of X-ray Technicians Performing Each Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	X-RAY TECHNICIAN	
FUNCTIONS	Percentage Performing Each Group of Functions	Percentage of Total Working Time Spent on Each Group of Functions
14. Mixing and administering (under physician's directions) barium enemas or barium meal.	100.0	1.4
15. Assisting physician in fluoroscope examination.	100.0	6.8
16. Assisting physician in special procedures.	45.5	8.9
17. Teaching.	72.7	1.9
18. Waiting for work.	100.0	13.2

Table No. 29 Percentage Distribution of X-ray Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	(1) Question	R.N.	L.P.N.	Nurses' Aide	Orderly	Housekeeping	Ward Sec.	Other	H.N. or Dept.Supv.	X-ray Technician
1. Cleaning and putting away equipment and supplies.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	54.5	---	---	---	90.9
2. Preparing and positioning patient on X-ray table.	U	---	---	---	---	---	---	---	---	100.0
	S	9.1	9.1	9.1	9.1	---	---	---	---	90.9
3. Adjusting immobilization devices such as restraints or chest straps, if necessary.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
4. Protecting the areas not to be X-rayed with lead shield, as with children or pregnant women.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
5.a. Check requisitions for good clinical history	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
b. Check developed films for markers, numbers, and dates.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
6. Booking appointments.	U	---	---	---	---	---	63.6	---	18.1	63.6
	S	---	---	---	---	---	45.5	---	18.2	45.5
7. Answering phone calls, taking messages, notifying appropriate personnel.	U	---	---	---	---	---	100.0	---	---	27.2
	S	---	---	---	---	---	---	---	100.0	18.2
8.a. Locating and supplying physicians with X-ray examinations from files	U	---	---	---	---	---	81.8	---	---	45.4
	S	---	---	---	---	---	---	---	100.0	---
b. Putting up completed films for doctors to observe	U	---	---	---	---	---	81.8	---	---	45.4
	S	---	---	---	---	---	---	---	90.9	9.1
c. Filing X-ray examinations and records.	U	---	---	---	---	---	100.0	---	---	36.3
	S	---	---	---	---	---	---	---	100.0	---
9.a. Maintaining records of drugs, supplies, and equipment used and X-rays taken	U	---	---	---	---	---	40.0	---	20.0	50.0
	S	---	---	---	---	---	45.5	---	18.2	45.5
b. Going to Central Supply to get routine supplies, drugs, and equipment	U	---	---	---	9.1	---	---	---	9.1	90.9
	S	---	---	---	9.1	---	---	9.1	---	90.9
c. Ordering drugs, supplies, or equipment outside hospital	U	---	---	---	---	---	---	---	54.5	45.4
	S	---	---	---	9.1	---	---	---	54.5	45.5
d. Checking for outdated supplies; returning them to Central Supply.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
10. Taking a routine X-ray including: a. Checking the patient's I.D.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
b. Measuring the size of the patient	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
c. Centering the patient to the table, the film to the patient, and centering the tube on the area to be X-rayed	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
d. Inserting the cassette into the Bucky	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
e. Selecting a technique on the control panel (appropriate quantity, or milliamperage; length of exposure; penetration or K.V.)	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
f. Instructing patient through microphone to take and hold a deep breath	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
g. Assisting patient in getting off table and into wheelchair or onto stretcher	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
h. Labeling X-ray film; taking it to developer.	U	---	---	---	---	---	9.1	---	---	90.9
	S	---	---	---	9.1	---	9.1	---	---	90.9

1. "U" means usually; "S" means should.

Table No. 29 Percentage Distribution of X-ray Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	Question(1)	R.N.	L.P.N.	Nurses' Aide	Orderly	Housekeeping	Ward Sec.	Other	H.N. or Dept.Supv.	X-ray Technician
11. Developing X-ray films: a. Inserting exposed film into processor	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
b. Removing developed film	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
c. Labeling, recording, or distributing film to appropriate persons	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
d. Replenishing supply of film in filming drawer.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
12. Go to the operating room to take an X-ray with a portable X-ray machine using sterile technique.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
13. Go to the floors to take an X-ray with a portable X-ray machine.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0
14. Mixing and administering (under physician's direction) barium enemas or barium meal.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	18.2	9.1	---	---	---	---	81.8
15. Assisting physician in fluoroscope examination: a. Getting necessary equipment and supplies	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	18.2	---	---	---	---	---	81.8
b. Adjusting cameras, table, television screens, patients, and overhead and side tubes	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	18.2	---	---	---	---	---	81.8
c. Inserting appropriate film	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	9.1	---	---	---	---	---	90.9
d. Other.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	---
16. Assisting physician in special procedures (selective arteriograms, aortagrams): a. Getting necessary equipment and supplies	U	---	---	---	---	---	---	---	---	100.0
	S	18.2	18.2	---	---	---	---	---	---	90.9
b. Adjusting cameras, table, televion screens, patients, and overhead and side tubes	U			---	---	---	---	---	---	100.0
	S	9.1	9.1	---	---	---	---	---	---	100.0
c. Inserting appropriate film	U	---	---	---	---	---	---	---	---	100.0
	S	9.1	9.1	---	---	---	---	---	---	100.0
d. Other.	U	---	---	---	---	---	---	---	---	100.0
	S	18.2	18.2	---	---	---	---	---	---	90.9
17. Teaching.	U	---	---	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	---	---	100.0

1. "U" means usually; "S" means should.

Table No. 30 Percentage of Inhalation Therapy Technicians Performing Each Function[1]

FUNCTIONS	INHALATION THERAPY TECHNICIAN		
	Percentage Performing Function	Percentage Not Performing Function	Percentage Where Function is Not Applicable
1. Check oxygen cylinders, nitrous oxide bank, and nitrous oxide cylinders to make sure supply is adequate.	80.0	---	20.0
2. Make rounds at 8 a.m. and 3 p.m.:			
a. Check warning lights in operating room, oxygen and nitrous oxide in delivery room, ambu bags and caryngoscopes on emergency carts, and permanent equipment in recovery room, emergency, and I.C.U.	80.0	---	20.0
b. Pick up used equipment from floors.	80.0	---	20.0
c. Visit inhalant patients.	80.0	---	20.0
d. Make any necessary adjustments, repairs (if possible) on equipment.	40.0	40.0	20.0
e. Restock any supplies on floors.	80.0	---	20.0
3. Wash, sterilize, and put away used equipment.	80.0	20.0	---
4. Order,receive, and put away supplies.	80.0	20.0	---
5. Examine patients' charts, record treatments given, and insert pulmonary lab function reports and pulmonary consultation sheets.	100.0	---	---
6. a. Record cost of materials and equipment used.	40.0	60.0	---
b. Make out patient charge slips for inhalants, equipment used, or treatments given.	100.0	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 30 Percentage of Inhalation Therapy Technicians Performing Each Function[1]

FUNCTIONS	INHALATION THERAPY TECHNICIAN		
	Percentage Performing Function	Percentage Not Performing Function	Percentage Where Function is Not Applicable
7. a. Maintain a current Inhalation Therapy Kardex.	80.0	20.0	---
b. Maintain ongoing records of patients serviced, of charges made to patients, and of pulmonary function sheets.	80.0	20.0	---
8. Care for suction machines, including wall suction units, thoracic suction units:			
a. Check and clean	80.0	---	20.0
b. Set up	80.0	---	20.0
c. Initially operate	80.0	---	20.0
d. Repair if necessary.	40.0	40.0	20.0
9. Care for oxygen mask,nasal cannula:			
a. Set up, attach, initially operate	80.0	---	20.0
b. Adjust or regulate flow of gases	80.0	---	20.0
c. Remove, dispose of, or clean.	80.0	---	20.0
10. Care for aerosols, administering both heated and cooled oxygen:			
a. Set up, attach, and initially operate	100.0	---	---
b. Adjust or regulate flow and temperature of gases	80.0	---	20.0
c. Remove and clean.	100.0	---	---
11. Care for incubators:			
a. Check and clean	20.0	60.0	20.0
b. Set up	20.0	60.0	20.0
c. Repair if necessary.	20.0	60.0	20.0
12. Care for croup tents in pediatrics:			
a. Check set up	60.0	20.0	20.0
b. Repair if necessary.	40.0	40.0	20.0

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[1] May not add to 100 percent because of rounding.

Table No. 30 Percentage of Inhalation Therapy Technicians Performing Each Function[1]

FUNCTIONS	INHALATION THERAPY TECHNICIAN		
	Percentage Performing Function	Percentage Not Performing Function	Percentage Where Function is Not Applicable
13. Care for ultrasonic nebulizers:			
a. Check and clean	80.0	---	20.0
b. Set up and initially operate	80.0	---	20.0
c. Adjust and regulate, including turning knobs or valves to regulate flow of gases	60.0	20.0	20.0
d. Repair if necessary.	20.0	60.0	20.0
14. Care for air mattress and hypothermia blanket:			
a. Check and clean	80.0	---	20.0
b. Set up and initially operate	80.0	---	20.0
c. Adjust and regulate temperature and flow of gases	80.0	---	20.0
d. Repair if necessary.	20.0	60.0	20.0
15. Care for Emerson volume ventilator :			
a. Check and clean	60.0	---	40.0
b. Set up and initially operate	60.0	---	40.0
c. Adjust and regulate flow of gases, speed of ventilation, amount of ventilation	60.0	---	40.0
d. Repair if necessary.	20.0	60.0	20.0
16. Care for Bird and Bennet respirators:			
a. Check and clean	80.0	---	20.0
b. Set up and initially operate	80.0	---	20.0
c. Adjust and regulate flow of gases	80.0	---	20.0
d. Repair if necessary.	20.0	60.0	20.0

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[1] May not add to 100 percent because of rounding.

Table No. 30 Percentage of Inhalation Therapy Technicians Performing Each Function[1]

FUNCTIONS	INHALATION THERAPY TECHNICIAN		
	Percentage Performing Function	Percentage Not Performing	Percentage Where Function is
17. Administer gases other than oxygen, including:			
a. Compressed air	60.0	20.0	20.0
b. Carbon dioxide.	---	80.0	20.0
18. Informally instruct trainees, nurses, interns, and residents in the operation and care of equipment.	80.0	20.0	---
19. Discuss treatments with physicians; make recommendations.	80.0	---	20.0
20. Administer medication via inhalation therapy equipment, including:			
a. Determine amount of medication necessary	---	80.0	20.0
b. Draw up medication.	80.0	---	20.0
21. Run blood gases on patients to determine PO_2, PCO_2, PH, HCO_3, and so on.	20.0	60.0	20.0
22. Assist physician in doing a lung profile, including measuring air capacity, flow rates, and so on.	20.0	60.0	20.0
23. Assist physician or nurse in resuscitation of a patient.	60.0	---	40.0
24. Other functions.	100.0	---	---
25. Supervisory.	20.0	80.0	---
26. Teaching.	40.0	60.0	---

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[1] May not add to 100 percent because of rounding.

Table No. 31 Percentage of Inhalation Therapy Technicians Performing Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	INHALATION THERAPY TECHNICIAN	
FUNCTIONS	Percentage Performing Each Group of Functions	% of Total Working Time Spent on Each Group of Functions
1. Check oxygen cylinders, nitrous oxide bank and nitrous oxide cylinders to make sure supply is adequate.	80.0	1.1
2. Make rounds at 8 a.m. and 3 p.m.	80.0	9.3
3. Wash, sterilize and put away used equipment.	80.0	9.3
4. Order, receive and put away used equipment.	80.0	2.4
5. Examine patients' charts, record treatments given and insert pulmonary lab function reports and pulmonary consultation sheets.	100.0	2.0
6. Record cost of materials and equipment used; make out patient charge slips.	100.0	5.0
7. Maintain a current Inhalation Therapy Kardex; maintain on-going records of patients serviced, of charges made to patients and of pulmonary function sheets.	100.0	3.5
8. Care for suction machines, including wall suction units and thoracic suction units.	80.0	4.3
9. Care for oxygen mask and nasal cannula.	80.0	4.3
10. Care for aerosols, administering both heated and cooled oxygen.	100.0	5.0
11. Care for incubators.	20.0	0.5
12. Care for croup tents in pediatrics.	80.0	0.5
13. Care for ultrasonic nebulizers.	80.0	8.0
14. Care for air mattress and hypothermia blanket.	80.0	3.0

Table No. 31 Percentage of Inhalation Therapy Technicians Performing Group of Functions, and Percentage of Total Working Time Spent on Each Group of Functions by Those Who Perform the Functions

	INHALATION THERAPY TECHNICIAN	
FUNCTIONS	Percentage Performing Each Group of Functions	% of Total Working Time Spent on Each Group of Functions
15. Care for Emerson volume ventilator.	60.0	3.8
16.& 20. Care for Bird and Bennet respirators.	80.0	16.5
17. Administer gases other than oxygen.	60.0	0.5
18. Informally instruct trainees, nurses, interns and residents in the operation and care of equipment.	80.0	4.3
19. Discuss treatments with physicians; make recommendations.	80.0	1.1
20. Administer medication via inhalation therapy equipment (time is confirmed with the time for function No. 16).	80.0	
21. Run blood gases on patients.	20.0	35.0
22. Assist physician in doing a lung profile.	20.0	20.0
23. Assist physician or nurse in resuscitation of a patient.	60.0	0.5
24. Other functions.	100.0	0.5
25. Supervisory duties.	20.0	3.0
26. Teaching.	40.0	3.0
27. Waiting for work.	----	----

Table No. 32 Percentage Distribution of Inhalation Therapists' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	Question[1]	R.N.	L.P.N.	Orderly	M.D.	Ward Sec.	Inhalation Therapy Technician	Pulmonary Lab Function Technician
1. Check oxygen cylinders, nitrous oxide bank, and nitrous oxide cylinders to make sure supply is adequate.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
2. Make rounds at 8 a.m. and 3 p.m. a. Check warning lights in operating room, oxygen and nitrous oxide in delivery room, ambu bags and caryngoscopes on emergency carts, and permanent equipment in recovery room, emergency, and I.C.U.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
b. Pick up used equipment from floors	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
c. Visit inhalant patients	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
d. Make any necessary adjustments, repairs (if possible) on equipment	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
e. Restock any supplies on floors.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
3. Wash, sterilize, and put away used equipment.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
4. Order, receive, and put away supplies.	U	---	---	---	20.0	---	80.0	20.0
	S	---	---	---	20.0	---	80.0	20.0
5. Examine patients' charts, record treatments given, and insert pulmonary lab function reports and pulmonary consultation sheets.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
6. a. Record cost of materials and equipment used	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	25.0	75.0	---
b. Make out patient charge slips for inhalants, equipment used, or treatment given.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	25.0	75.0	---
7. a. Maintain a current Inhalation Therapy Kardex	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	25.0	75.0	---
b. Maintain ongoing records of patients serviced, of charges made to patients and of pulmonary function sheets.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	25.0	75.0	---
8. Care of suction machines, including wall suction units, thoracic suction units: a. Check and clean	U	20.0	20.0	---	---	---	80.0	---
	S	25.0	25.0	---	---	---	100.0	---
b. Set up	U	80.0	80.0	---	---	---	100.0	---
	S	100.0	100.0	---	---	---	100.0	---
c. Initially operate	U	100.0	100.0	---	---	---	80.0	---
	S	100.0	100.0	---	---	---	100.0	---
d. Repair if necessary.	U	40.0	40.0	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
9. Care for oxygen mask and nasal cannula: a. Set up, attach, initially operate	U	---	---	---	---	---	100.0	---
	S	20.0	20.0	---	---	---	100.0	---
b. Adjust or regulate flow of gases	U	---	---	---	---	---	60.0	---
	S	60.0	60.0	---	---	---	60.0	---
c. Remove, dispose of, or clean.	U	---	---	---	---	---	100.0	---
	S	20.0	20.0	---	---	---	100.0	---

Table No. 32 Percentage Distribution of Inhalation Therapists' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	Question[1]	R.N.	L.P.N.	Orderly	M.D.	Ward Sec.	Inhalation Therapy Technician	Pulmonary Lab Function Technician
10. Care for aerosols, administering both heated and cooled oxygen:								
a. Set up, attach, and initially operate	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
b. Adjust or regulate flow and temperature of gases	U	80.0	80.0	---	---	---	60.0	---
	S	80.0	80.0	---	---	---	60.0	---
c. Remove and clean.	U	20.0	20.0	---	---	---	100.0	---
	S	20.0	20.0	---	---	---	100.0	---
11. Care for incubators:								
a. Check and clean	U	80.0	80.0	---	---	---	20.0	---
	S	80.0	80.0	---	---	---	20.0	---
b. Set up	U	60.0	60.0	---	---	---	40.0	---
	S	80.0	80.0	---	---	---	40.0	---
c. Repair if necessary.	U	20.0	20.0	---	---	---	80.0	---
	S	20.0	20.0	---	---	---	80.0	---
12. Care for croup tents in pediatrics:								
a. Check set up	U	80.0	80.0	---	---	---	40.0	---
	S	80.0	80.0	---	---	---	40.0	---
b. Repair if necessary.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
13. Care for ultrasonic nebulizers:								
a. Check and clean	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
b. Set up and initially operate	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
c. Adjust and regulate, including turning knobs or valves to regulate flow of gases	U	80.0	80.0	---	20.0	---	20.0	---
	S	80.0	80.0	---	20.0	---	20.0	---
d. Repair if necessary.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
14. Care for air mattress and hypothermia blanket:								
a. Check and clean	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
b. Set up and initially operate	U	---	---	20.0	---	---	100.0	---
	S	---	---	20.0	---	---	100.0	---
c. Adjust and regulate temperature and flow of gases	U	40.0	40.0	---	---	---	60.0	---
	S	40.0	40.0	---	---	---	60.0	---
d. Repair if necessary.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
15. Care for Emerson volume ventilator: & 16. Care for Bird and Bennet respirators: a. Check and clean	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
b. Set up and initially operate	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
c. Adjust and regulate flow of gases	U	40.0	40.0	---	---	---	100.0	---
	S	40.0	40.0	---	---	---	100.0	---
d. Repair if necessary.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---

Table No. 32 Percentage Distribution of Inhalation Therapists' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	Question[1]	R.N.	L.P.N.	Orderly	M.D.	Ward Sec.	Inhalation Therapy Technician	Pulmonary Lab Function Technician
17. Administer gases other than oxygen, including:								
a. Compressed air	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
b. Carbon dioxide.	U	---	---	---	100.0	---	---	---
	S	---	---	---	100.0	---	---	---
18. Informally instruct trainees, nurses, interns, and residents in the care and operation of equipment.	U	---	---	---	20.0	---	100.0	---
	S	---	---	---	20.0	---	100.0	---
19. Discuss treatments with physicians; make recommendations.	U	---	---	---	20.0	---	100.0	---
	S	---	---	---	20.0	---	100.0	---
20. Administer medication via inhalation therapy equipment, including:								
a. Determine amount of medication necessary	U	---	---	---	100.0	---	---	---
	S	---	---	---	100.0	---	---	---
b. Draw up medication.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
21. Run blood gases on patients to determine PO_2, PCO_2, PH, HCO_3, and so on.	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	60.0	100.0
22. Assist physician in doing a lung profile, including measuring air capacity, flow rates and so on.	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	60.0	100.0
23. Assist physician or nurse in resuscitation of a patient.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	100.0	---
24. Other functions.	U	---	---	---	---	---	100.0	---
	S	---	---	---	---	---	---	---

[1] "U" means usually; "S" means should.

Table No. 33 **Percentage of Laboratory Technicians Performing Each Function,[1] and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Functions**

FUNCTIONS	Percentage Performing Function	Percentage of Total Working Time Spent on Funct.	Percentage Not Perf. Function	Percentage Where Funct is Not Applicable
I. GENERAL				
a. Gather supplies, instruments and equipment in preparation for tests.	100.0	5.5	----	----
b. Clean and put away equipment and supplies after use.	75.0	5.2	----	25.0
c. Care for and maintain equipment.	91.7	1.0	8.3	----
d. Check stock levels.	100.0	0.5	----	----
e. Order and put away supplies, equipment and biological items.	75.0	2.4	25.0	----
f. Record and report tests.	100.0	10.8	----	----
g. Prepare standards and reagents.	58.3	1.9	25.0	16.7
h. Draw blood (excluding blood bank):				
1. From out-patients	41.7	2.5	50.0	8.3
2. Morning: daily orders	50.0	18.0	50.0	----
3. Afternoon: pre-operative.	16.7	4.3	83.3	----
i. Other.	33.3	3.0	66.7	----
IX. Teaching.	72.7	2.7	27.3	----
X. Research.	18.2	Done on own Time	81.8	----
XI. Supervisory duties.	45.5	2.5	54.5	----
XII. Waiting for work.	20.0	1.3	80.0	----

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1. May not add to 100 percent because of rounding.

Table No. 34 Percentage Distribution of Blood Bank Technicians' Responses to "Who Usually Performs This Function?" and " Who Should Perform This Function?"

FUNCTIONS	(1) Question	M.D.	Dishwasher	Clerical	Other	Supervisor	Other Approp. Dept.	Lab Technician
I. General								
a. Gather supplies, instruments and equipment in preparation for tests	U	---	---	---	---	8.3	---	100.0
	S	---	---	---	---	---	---	100.0
b. Clean and put away equipment and supplies after use	U	---	44.4	---	11.1	---	---	88.8
	S	---	44.4	---	11.1	---	---	88.9
c. Care for and maintain equipment	U	---	---	---	18.1	18.1	---	100.0
	S	---	---	---	18.2	18.2	---	100.0
d. Check stock levels	U	---	---	---	---	18.1	---	83.3
	S	---	---	---	---	16.6	---	83.4
e. Order and put away supplies, equipment and biological items	U	---	---	---	---	63.6	---	90.9
	S	---	---	---	---	63.6	---	90.9
f. Record and report tests	U	---	---	---	---	16.6	---	83.3
	S	---	---	8.3	---	16.6	---	75.0
g. Prepare standards and reagents	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	100.0
h. Draw blood (excluding blood bank) 1.From out-patients	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	100.0
2.Morning: daily orders	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	100.0
3.Afternoon: pre-operative	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	50.0	50.0
i. Other.	U	---	---	---	---	50.0	---	50.0
	S	---	---	20.0	---	20.0	---	60.0
IX. Teaching.	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	100.0
X. Research.	U	100.0	---	---	---	---	---	100.0
	S	100.0	---	---	---	---	---	100.0
XI. Supervisory duties.	U	---	---	---	---	---	---	100.0
	S	---	---	---	---	---	---	100.0
XII. Waiting for work.	U	---	---	---	---	---	---	---
	S	---	---	---	---	---	---	---

1. "U" means usually; "S" means should.

Table No. 35 Percentage of Bacteriology Technicians Performing Each Function, and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function

FUNCTIONS	Percentage Performing Function	Percentage of Total Working Time Spent on Funct.	Percentage Not Perf. Function	Percentage Where Funct. is Not Applicable
II. BACTERIOLOGY (Includes mycology and serology)				
a. Receive and process routine cultures.	100.0	27.5	----	----
b. Antibiotic sensitivity test (Time is given with Part a.).	100.0		----	----
c. Antibiotic blood level.	50.0	3.0	50.0	----
d. Prepare and stain smears (Time is given with Part a.).	100.0		----	----
e. Colony count.	100.0	3.0	----	----
f. "C" reactive protein tests.	100.0	0.5	----	----
g. Complement fixation test.	----	----	----	100.0
h. (1) Infectious mononucleosis heterophile and monospot.	100.0	3.0	----	----
(2) Heterophile presumptive and differential antibody test.	50.0	0.5	50.0	----
i. Febrile agglutinin.	100.0	4.3	----	----
j. Rheumatoid arthritis test.	100.0	3.0	----	----
k. Strep MG test.	----	----	100.0	----
l. Antistreptolysin "O" titre.	100.0	5.5	----	----
m. Pregnancy test.	100.0	10.5	----	----
n. Sperm count.	----	----	100.0	----
o. Prepare culture media.	50.0	3.0	----	50.0
p. Cultivate mycology specimens and examine mycology specimens microscopically.	100.0	1.8	----	----
q. Other: plant cultures.	50.0	3.0	50.0	----

Table No. 36 Percentage Distribution of Bacteriology Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	Question (1)	Other	Lab Technician
II. Bacteriology (includes mycology and serology)			
a. Receive and process routine cultures	U	---	100.0
	S	---	100.0
b. Antibiotic sensitivity test	U	---	100.0
	S	---	100.0
c. Antibiotic blood level	U	---	100.0
	S	---	100.0
d. Prepare and stain smears	U	---	100.0
	S	---	100.0
e. Colony count	U	---	100.0
	S	---	100.0
f. "C" reactive protein tests	U	---	100.0
	S	---	100.0
g. Complement fixation test	U	---	---
	S	---	---
h.1. Infectious mononucleosis heterophile and monospot	U	---	100.0
	S	---	100.0
2. Heterophile presumptive and differential antibody test	U	---	100.0
	S	---	100.0
i. Febrile agglutinin	U	---	100.0
	S	---	100.0
j. Rheumatoid arthritis test	U	---	100.0
	S	---	100.0
k. Strep MG test	U	---	---
	S	---	---
l. Antistreptolysin "O" titre	U	---	100.0
	S	---	100.0
m. Pregnancy Test	U	---	100.0
	S	---	100.0
n. Sperm Count	U	---	---
	S	---	---
o. Prepare culture media	U	---	100.0
	S	---	100.0
p. Cultivate mycology specimens and examine mycology specimens microscopically	U	---	100.0
	S	---	100.0
q. Other: plant cultures.	U	100.0	100.0
	S	100.0	100.0

1. "U" means usually;
"S" means should.

Table No. 37 Percentage of Blood Bank Technicians Performing Each Function, and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function

FUNCTIONS	Percentage Performing Function	Percentage of Total Working Time Spent on Funct.	Percentage Not Perf. Function	Percentage Where Funct. is Not Applicable
III. BLOOD BANK				
a. Attach serial numbers to units.	50.0	8.0	50.0	----
b. Store blood according to grouping and factor.	100.0	0.5	----	----
c. Prepare blood for shipment.	100.0	1.8	----	----
d. Dispose of blood after time limit.	100.0	3.0	----	----
e. Screen and process blood donors.	50.0	3.0	50.0	----
f. Draw patient's blood for grouping, typing and crossmatching.	----	----	100.0	----
g. Draw blood from donors.	----	----	100.0	----
h. Perform direct and indirect Coombs test.	100.0	3.0	----	----
i. Group and type blood of donors and recipients.	100.0	1.8	----	----
j. Antibody screen.	100.0	8.0	----	----
k. Cord blood.	100.0	0.5	----	----
l. Cold agglutinins.	----	----	100.0	----
m. Rapid Hinton.	50.0	3.0	----	50.0
n. Rho Gam Studies.	50.0	0.5	50.0	----
o. Rh Genotype.	50.0	3.0	50.0	----
p. Crossmatch blood.	100.0	42.5	----	----
q. Fractionate blood products.	----	----	100.0	----
r. Rh Titre.	50.0	0.5	50.0	----
s. Follow-up transfusing reactions.	50.0	0.5	50.0	----
t. Other: answering the telephone.	50.0	3.0	50.0	----

Table No. 38 Percentage Distribution of Blood Bank Technicians' Response to "Who Usually Performs This Function? and "Who Should Perform This Function?"

FUNCTIONS	Question[1]	M.D.	Clerical	Other	Supervisor	Lab Technician
III. Blood Bank						
a. Attach serial numbers to units	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
b. Store blood according to grouping and factor	U	---	---	---	50.0	50.0
	S	---	---	---	50.0	50.0
c. Prepare blood for shipment	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
d. Dispose of blood after time limit	U	---	---	---	50.0	100.0
	S	---	---	---	50.0	100.0
e. Screen and process blood donors	U	---	---	50.0	---	50.0
	S	---	---	50.0	---	50.0
f. Draw patient's blood for grouping, typing and crossmatching	U	50.0	---	50.0	---	50.0
	S	50.0	---	50.0	---	50.0
g. Draw blood from donors	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
h. Perform direct and indirect Coombs test	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
i. Group and type blood of donors and recipients	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
j. Antibody screen	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
k. Cord Blood	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
l. Cold agglutinins	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
m. Rapid Hinton	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
n. Rho Gam Studies	U	---	---	---	---	100.0
	S	---	---	---	50.0	50.0
o. Rh Genotype	U	---	---	---	---	100.0
	S	---	---	---	50.0	50.0
p. Crossmatch blood	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
q. Fractionate blood products	U	---	---	---	---	100.0
	S	---	---	---	---	100.0
r. Rh Titre	U	---	---	---	---	100.0
	S	---	---	---	50.0	50.0
s. Follow-up Transfusing reactions	U	---	---	---	---	100.0
	S	---	---	---	50.0	50.0
t. Other: answering the telephone.	U	---	---	50.0	---	50.0
	S	---	50.0	---	50.0	---

[1] "U" means usually; "S" means should.

Table No. 39 Percentage of Chemistry Technicians Performing Each Function, and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function

FUNCTIONS	Percentage Performing Function	Percentage of Total Working Time Spent on Funct.	Percentage Not Performing Function
IV. CHEMISTRY			
1. Cephalin Flocculation.	100.0	0.5	----
2. Ph Urine.	50.0	0.5	50.0
3. Protein, Total.	100.0	1.8	----
4. Protein, Qualitative Urine.	100.0	0.5	----
5. Specific Gravity.	50.0	0.5	50.0
6. Albumin: Qualitative Quantitative.	50.0	0.5	50.0
7. Albumin and Globulin.	100.0	0.5	----
8. BSP (Bromosulphalein).	100.0	1.8	----
9. B.U.N. (Urea Nitrogen).	100.0	3.0	----
10. Calcium: Qualitative Urine Quantitative.	100.0 50.0	1.8	---- 50.0
11. Chloride.	100.0	1.8	----
12. Gastric contents.	100.0	0.5	----
13. Hemoglobin, Plasma.	----	----	100.0
14. Occult Blood.	50.0	0.5	50.0
15. Thymol Turbidity.	100.0	0.5	----
16. Amylase.	100.0	3.0	----
17. Bilirubin.	100.0	1.8	----
18. Carbon dioxide.	100.0	3.0	----
19. Gastric Analysis, Diagnex.	100.0	1.8	----

Table No. 39 Percentage of Chemistry Technicians Performing Each Function, and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function

FUNCTIONS	Percentage Performing Function	Percentage of Total Working Time Spent on Funct.	Percentage Not Performing Function
20. Glucose: Serum and CSF	100.0	5.5	----
Urine Qualitative	50.0		50.0
Glucose Tolerance Test (3 hours)	100.0		----
Glucose Tolerance Test (longer than 3 hours).	100.0		----
21. Ph Blood.	100.0	0.5	----
22. Phosphatose, Acid.	100.0	1.8	----
23. Potassium.	100.0	3.0	----
24. Protein CSF.	100.0	3.0	----
25. Salicylates.	100.0	0.5	----
26. Sodium.	100.0	3.0	----
27. Urea Clearance.	50.0	0.5	50.0
28. Uric Acid.	50.0	0.5	50.0
29. Urobilinogen.	----	----	100.0
30. Spinal Fluid, Complete Examination.	100.0	0.5	----
31. Osmolarity.	----	----	100.0
32. Cholesterol.	100.0	0.5	----
33. Cholesterol Total and Esters.	100.0	0.5	----
34. Colloidal Gold.	100.0	0.5	----
35. Creatine.	----	----	100.0
36. PCO_2 and PO_2.	100.0	0.5	----
37. Phosphatase, Alkaline.	50.0	0.5	50.0
38. Platelet Antibody.	----	----	100.0
39. Transaminase (SGO-T).	----	----	100.0
40. Transaminase (SGP-T).	100.0	3.0	----
41. Creatinine Clearance.	----	----	100.0
42. Red Cell Survival.	----	----	100.0
43. Schilling Test.	----	----	100.0
44. Other.	----	----	100.0

Table No. 40 Percentage Distribution of Chemistry Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	LAB TECHNICIAN
IV. Chemistry		
1. Cephalin Flocculation.	U S	100.0 100.0
2. Ph Urine.	U S	100.0 100.0
3. Protein, total.	U S	100.0 100.0
4. Protein, Qualitative Urine.	U S	100.0 100.0
5. Specific Gravity.	U S	100.0 100.0
6. Albumin a. Qualitative	U S	100.0 100.0
b. Quantitative.	U S	100.0 100.0
7. Albumin and Globulin.	U S	100.0 100.0
8. B.S.P. (Bromosulphalein).	U S	100.0 100.0
9. B.U.N. (Urea Nitrogen).	U S	100.0 100.0
10. Calcium a. Qualitative Urine	U S	100.0 100.0
b. Quantitative.	U S	100.0 100.0

1. "U" means usually;
"S" means should.

Table No. 40 Percentage Distribution of Chemistry Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	LAB TECHNICIAN
11. Chloride.	U S	100.0 100.0
12. Gastric contents.	U S	100.0 100.0
13. Hemoglobin, Plasma.	U S	---- ----
14. Occult Blood.	U S	100.0 100.0
15. Thymol Turbidity.	U S	100.0 100.0
16. Amylase.	U S	100.0 100.0
17. Bilirubin.	U S	100.0 100.0
18. Carbondioxide.	U S	100.0 100.0
19. Gastric Analysis, Diagnex.	U S	100.0 100.0
20. Glucose a. Serum and CSF	U S	100.0 100.0
b. Urine Qualitative	U S	100.0 100.0

1. "U" means usually;
"S" means should.

Table No. 40 Percentage Distribution of Chemistry Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	OTHER APPROPRIATE DEPARTMENT	LAB TECHNICIAN
c. Glucose Tolerance Test (hours, 3)	U	-----	100.0
d. Glucose Tolerance Test (longer than 3 hours).	U S	---- ----	100.0 100.0
21. Ph blood.	U S	---- ----	100.0 100.0
22. Phosphatose, Acid.	U S	---- ----	100.0 100.0
23. Potassium.	U S	---- ----	100.0 100.0
24. Protein C.S.F.	U S	---- ----	100.0 100.0
25. Salicylates.	U S	---- ----	100.0 100.0
26. Sodium.	U S	---- ----	100.0 100.0
27. Urea Clearance.	U S	---- ----	100.0 100.0
28. Uric Acid.	U S	---- ----	100.0 100.0
29. Urobilinogen.	U S	---- ----	---- ----
30. Spinal Fluid, Complete Examination.	U S	100.0 50.0	50.0 100.0

1. "U" means usually;
"S" means should.

Table No. 40 Percentage Distribution of Chemistry Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	OTHER APPROPRIATE DEPARTMENT	LAB TECHNICIAN
31. Osmolarity.	U S	---- ----	---- ----
32. Cholesterol.	U S	100.0 ----	---- 100.0
33. Cholesterol Total and Esters.	U S	100.0 ----	---- 100.0
34. Colloidal Gold.	U S	100.0 ----	---- 100.0
35. Creatine.	U S	---- ----	---- ----
36. PCO_2 and PO_2.	U S	100.0 ----	---- 100.0
37. Phosphatase, Alkaline.	U S	100.0 ----	---- 100.0
38. Platelet Antibody.	U S	---- ----	---- ----
39. Transaminase (SGO-T).	U S	100.0 ----	---- 100.0
40. Transaminase (SGP-T).	U S	100.0 ----	---- 100.0

1. "U" means usually;
"S" means should.

Table No. 41 Percentage of Cytology Technicians and Histology Technicians Performing Each Function, and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function

FUNCTIONS.	Percentage Performing Function	Percentage of Total Working Time Spent on Funct.	Percentage Not Performing Function
V. CYTOLOGY			
a. Maintain file card on each patient.	100.0	8.0	----
b. Number and prepare smears: Non-gynecological smears, Pap smears.	100.0	3.0	----
c. Stain and mount smears: Non-gynecological smears, Pap smears.	100.0	8.0	----
d. Screen smears for cellular changes.	100.0	65.0	----
e. Hormonal studies.	100.0	0.5	----
f. Sex chromatin studies.	100.0	0.5	----
g. Other: help in other departments.	100.0	0.5	----
VII. HISTOLOGY			
a. Prepare specimens for processing.	100.0	3.0	----
b. Embed tissue in paraffin.	50.0	20.0	50.0
c. Section tissue in microscopic blocks.	100.0	5.5	----
d. Prepare stains: (1) routine	100.0	8.0	----
(2) special.	50.0	3.0	50.0
e. & f. Stain specimens and mount stained specimens.	100.0	13.0	----
g. Prepare frozen sections.	100.0	5.5	----
h. Assist in bone marrow examination.	50.0	8.0	50.0
i. Assist pathologist at autopsy.	----	----	100.0
j. Decalcify specimens of bone and teeth.	100.0	3.0	----
k. Other.	----	----	100.0

Table No. 42 Percentage Distribution of Cytology and Histology Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	CLERICAL	OTHER APPROPRIATE DEPARTMENT	SUPERVISOR	LAB TECHNICIAN
V. Cytology					
a. Maintain file card on each patient.	U	100.0	----	----	100.0
	S	100.0	----	----	100.0
b. Number and prepare smears: 1. Non-gynecological smears	U	----	----	----	100.0
	S	----	----	----	100.0
2. Pap smears.	U	----	----	----	100.0
	S	----	----	----	100.0
c. Stain and mount smears: 1. Non-gynecological smears	U	----	----	----	100.0
	S	----	----	----	100.0
2. Pap smears.	U	----	----	----	100.0
	S	----	----	----	100.0
d. Screen smears for cellular changes.	U	----	----	----	100.0
	S	----	----	----	100.0
e. Hormonal studies.	U	----	----	----	100.0
	S	----	----	----	100.0
f. Sex chromatin studies.	U	----	----	----	100.0
	S	----	----	----	100.0
g. Other: help in other departments.	U	----	100.0	----	----
	S	----	100.0	----	----
VII. Histology					
a. Prepare specimens for processing.	U	----	----	----	100.0
	S	----	----	----	100.0
b. Embed tissue in paraffin.	U	----	----	----	100.0
	S	----	----	----	100.0
c. Section tissue in microscopic blocks.	U	----	----	----	100.0
	S	----	----	----	100.0

1. "U" means usually;
"S" means should.

Table No. 42 Percentage Distribution of Cytology and Histology Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	(1) QUESTION	CLERICAL	OTHER APPROPRIATE DEPARTMENT	SUPERVISOR	LAB TECHNICIAN
d. Prepare stains: Routine and special.	U	----	----	----	100.0
	S	----	----	----	100.0
e. Stain specimens.	U	----	----	----	100.0
	S	----	----	----	100.0
f. Mount stained specimens.	U	----	----	----	100.0
	S	----	----	----	100.0
g. Prepare frozen sections.	U	----	----	----	100.0
	S	----	----	----	100.0
h. Assist in bone marrow examination.	U	----	----	----	100.0
	S	----	----	----	100.0
i. Assist pathologist at autopsy.	U	----	----	100.0	----
	S	----	----	100.0	----
j. Decalcify specimens of bone and teeth.	U	----	----	----	100.0
	S	----	----	----	100.0

1. "U" means usually;
"S" means should.

Table No. 43 **Percentage of Hematology Technicians Performing Each Function, and Percentage of Total Working Time Spent on Each Function by Those Who Perform the Function**

FUNCTIONS	Percentage Performing Function	Percentage of Total Working Time Spent on Funct.	Percentage Not Perf. Function	Percentage Where Funct. is Not Applicable
VI. HEMATOLOGY				
a. Stain blood smears:				
(1) by hand	----	----	100.0	----
(2) using automatic staining machine.	100.0	3.0	----	----
b. Identify: immature blood cells and morphological variations of blood cells.	100.0	5.5	----	----
c. Bleeding and clotting tests:				
(1) capillary fragility tests	----	----	50.0	50.0
(2) clot retraction	50.0	0.5	----	50.0
(3) prothrombin time and prothrombin consumption tests	50.0	8.0	----	50.0
(4) thromboplastin generation	50.0	0.5	----	50.0
(5) fibrinogen estimation	50.0	3.0	----	50.0
(6) partial thromboplastin.	50.0	0.5	----	50.0
d. Erythrocytes (red blood cells):				
(1) hematocrit	100.0	5.5	----	----
(2) erythrocyte fragility	100.0	0.5	----	----
(3) erythrocyte sedimentation rate	100.0	3.0	----	----
(4) erythrocyte indices.	50.0	3.0	50.0	----
e. Blood cell counts:				
(1) red blood cell count	100.0	0.5	----	----
(2),(3), (4) white blood cell count, differential leukocyte count, platelet count	100.0	8.0	----	----
(5) eosinophil count.	100.0	0.5	----	----
f. Sickle cell preparation.	100.0	3.0	----	----
g. Spinal fluid cell count and differential.	100.0	5.5	----	----
h. Spinal fluid hematocrit.	50.0	0.5	50.0	----
i. L.E. preparation.	100.0	3.0	----	----
j. Leukocyte alkaline phosphatase.	----	----	100.0	----
K. Other.	----	----	100.0	----

able No. 44 Percentage Distribution of Hematology Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	(1) QUESTION	ANOTHER APPROPR. DEPARTMENT	LAB TECHNICIAN
I. Hematology			
a. Stain blood smears: 1. By hand	U S	---- ----	100.0 100.0
2. Using automatic staining machine.	U S	---- ----	100.0 100.0
b. 1. Identify: Immature blood cells	U S	---- ----	100.0 100.0
2. Morphological variations of blood cells.	U S	---- ----	100.0 100.0
c. Bleeding and clotting tests: 1. Capillary fragility tests	U S	50.0 50.0	50.0 50.0
2. Clot retraction	U S	50.0 50.0	50.0 50.0
3. Prothrombin time and prothrombin consumption tests	U S	50.0 50.0	50.0 50.0
4. Thromboplastin generation	U S	50.0 50.0	50.0 50.0
5. Fibrinogen estimation	U S	50.0 50.0	50.0 50.0
6. Partial thromboplastin.	U S	50.0 50.0	50.0 50.0

. "U" means usually;
"S" means should.

Table No. 44 Percentage Distribution of Hematology Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	ANOTHER APPROPR. DEPARTMENT	LAB TECHNICIAN
d. Erythrocytes (red blood cells): 1. Hematocrit	U	----	100.0
	S	----	100.0
2. Erythrocyte fragility	U	----	100.0
	S	----	100.0
3. Erythrocyte sedimentation rate	U	----	100.0
	S	----	100.0
4. Erythrocyte indices.	U	50.0	50.0
	S	----	100.0
e. Blood cell counts : 1. Red blood cell count	U	----	100.0
	S	----	100.0
2. White blood cell count	U	----	100.0
	S	----	100.0
3. Differential leukocyte count	U	----	100.0
	S	----	100.0
4. Platelet count	U	----	100.0
	S	----	100.0
5. Eosinophil count.	U	----	100.0
	S	----	100.0
f. Sickle cell preparation.	U	----	100.0
	S	----	100.0

1. "U" means usually;
"S" means should.

Table No. 44 Percentage Distribution of Hematology Technicians' Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	ANOTHER APPROPR. DEPARTMENT	LAB TECHNICIAN
g. Spinal fluid cell count and differential.	U S	---- ----	100.0 100.0
h. Spinal fluid hematocrit.	U S	---- ----	100.0 100.0
i. L.E. preparation.	U S	---- ----	100.0 100.0
j. Leukocyte alkaline phosphatase.	U S	100.0 ----	----- -----
k. Other.	U S	---- ----	----- -----

. "U" means usually;
"S" means should.

Table No. 45 Urinalysis Technician Performing Each Function, and Percentage of Working Time Spent on Each Function

FUNCTIONS	Response	Percentage of Total Working Time Spent on Function
VIII. URINALYSIS AND PARASITOLOGY		
a. Examine urine specimens macroscopically and microscopically.	X[1]	60.0
b. , d.-g. Urine acidity (PH), occult blood, albumin, hemoglobin and glucose.	X	3.0
c. Urine specific gravity.	X	8.0
h. Bile.	X	0.5
i. B.U.N. (Urea Nitrogen).	Y[2]	----
j. Calcium.	Y	----
K. Bilirubin.	Y	----
l. Porphyrins.	Y	----
m. Ketones.	X	0.5
n. Bence-Jones protein.	X	0.5
O. Phenolsulfonphthalein (PSP) excretion test.	Y	----
p. Identify parasitic and disease carrying arthropods.	Z[3]	----
q. Identify protozoans, cestodes, nematodes, trematodes.	Y	----
r. Scotch tape test.	Y	----
s. Stain parasitological smears.	Z	----
t. Fat,fatty acids.	Y	----
u. Fat, neutral fat only (microscopic).	Y	----
v. Fat and meat fibers.	Y	----
w. Concentration technic.	Z	----

---

[1] X indicates the function is performed.

[2] Y indicates the function is not performed.

[3] Z indicates the function is not performed in this department.

Table No. 46 **Urinalysis Technician's Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"**

FUNCTIONS	QUESTION (1)	OTHER APPROPRIATE DEPARTMENT	LAB TECHNICIAN
VIII. Urinalysis and Parasitology			
a. Examine urine specimens macroscopically and microscopically.	U S	---- ----	X[2] X
b. Urine acidity (PH).	U S	---- ----	X X
c. Urine specific gravity.	U S	---- ----	X X
d. Occult blood.	U S	---- ----	X X
e. Albumin.	U S	---- ----	X X
f. Hemoglobin.	U S	---- ----	X X
g. Glucose.	U S	---- ----	X X
h. Bile.	U S	---- ----	X X
i. B.U.N. (Urea Nitrogen).	U S	X X	---- ----
j. Calcium.	U S	X X	---- ----

1. "U" means usually;
   "S" means should.

2. X indicates the response.

Table No. 46 Urinalysis Technician's Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	(1) QUESTIONS	OTHER APPROPR. DEPARTMENT	LAB TECHNICIAN
k. Bilirubin.	U S	---- ----	X2 X
l. Porphyrins.	U S	---- ----	X X
m. Ketones.	U S	---- ----	X X
n. Bence-Jones protein.	U S	---- ----	X X
o. Phenolsulfonphthalein (PSP) excretion test.	U S	---- ----	---- ----
p. Identify parasitic and disease carrying arthropods.	U S	X X	---- ----
q. Identify protozoans, cestodes, nematodes, trematodes.	U S	X X	---- ----
r. Scotch tape test.	U S	---- ----	X X
s. Stain parasitological smears.	U S	X X	---- ----
t. Fat, fatty acids.	U S	---- ----	---- ----

1. "U" means usually;
   "S" means should.

2. X indicates the response.

Table No. 47 Functions Performed by EKG Technician and Percentage of Total Working Time Spent on Each Group of Functions

FUNCTIONS	EKG TECHNICIAN[1] % of Total Working Time Spent on Each Group of Functions
1. Cleaning and putting away equipment and supplies.	3.0
2. Checking equipment, restocking supplies on EKG machines.	3.0
3. Making minor adjustments and repairs to machines or notifying repair company.	0.5
4. Checking and sorting requisitions in the morning prior to going to floors.	3.0
5. a. Examining patient's chart, indicating completed EKG b. Using addressograph to stamp patient's charge slip.	3.0
6. a. Bringing EKG machine to patient's bedside b. Attaching and moving chest cup to successive positions.	20.0
7. Doing a rhythm strip at the verbal request of a physician.	3.0
8. Operating the EKG machine: a. Turning knob to select appropriate leads b. Marking the strip to indicate the lead c. Checking the stylus as necessary d. Removing and wiping off electrodes; cleaning paste off patient and remaking bed.	40.0
9. Assisting physician or cardiologist by reporting unusual abnormalities immediately.	0.5
10. Performing step test: a. Taking complete EKG first b. Instructing patient to walk up and down steps c. Taking five or six chest and limb leads, according to physician's request, after three minutes and after five minutes.	0.5
11. Other functions.	-

[1] She performs all parts of each function.

Table No. 47 Functions Performed by EKG Technician and Percentage of Total Working Time Spent on Each Group of Functions

FUNCTIONS	EKG TECHNICIAN[1]
	% of Total Working Time Spent on Each Group of Functions
12. Teaching.	3.0
13. Supervisory duties.	3.0
14. Waiting for work.	8.0

---

[1] She performs all parts of each function.

Table No. 48 Distribution of EKG Technician's Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION[1]	WARD SECRETARY	EKG TECHNICIAN
1. Cleaning and putting away equipment and supplies.	U S	X[2] X	X -
2. Checking equipment, restocking supplies on EKG machines.	U S	- -	X X
3. Making minor adjustments and repairs to machines or notifying repair company.	U S	- -	X X
4. Checking and sorting requisitions in the morning prior to going to floors.	U S	- -	X X
5a. Examining patient's chart, indicating completed EKG	U S	- -	X X
b. Using addressograph to stamp patient's charge slip.	U S	- -	X X
6a. Bringing EKG machine to patients' bedside	U S	- -	X X
b. Attaching and moving chest cup to successive positions.	U S	- -	X X
7. Doing a rhythm strip at the verbal request of a physician.	U S	- -	X X
8. Operating the EKG machine: a. Turning knob to select appropriate leads	U S	- -	X X
b. Marking the strip to indicate the lead	U S	- -	X X
c. Checking the stlyus as necessary	U S	- -	X X
d. Removing and wiping of electrodes; cleaning paste off patient and remaking bed.	U S	- -	X X

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[1] "U" means usually; "S" means should.

[2] X indicates a response.

Table No. 48 Distribution of EKG Technician's Responses to "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION[1]	WARD SECRETARY	EKG TECHNICIAN
9. Assisting physician or cardiologist by reporting unusual abnormalities immediately.	U S	- -	X X
10. Performing step test: a. Taking complete EKG first	U S	- -	X X
b. Instructing patient to walk up and down steps	U S	- -	X X
c. Taking five or six chest and limb leads according to physician's request, after three minutes and after five minutes.	U S	- -	X X
11. Other functions.	U S	- -	- -
12. Teaching.	U S	- -	X X
13. Supervisory duties.	U S	- -	X X
14. Waiting for work.	U S	- -	X X

[1] "U" means usually; "S" means should.

[2] X indicates a response.

Table No. 49 Percentage of Total Working Time Spent by Neighborhood Health Worker on Each Function

FUNCTIONS	NEIGHBORHOOD HEALTH WORKER	
	Response	% of Total Working Time Spent on Each Function
1. a. Straightening up, cleaning the clinic area	X[1]	8.0
b. Cleaning used equipment and instruments	Y[2]	---
c. Putting away supplies and equipment.	X	0.5
2. Booking appointments.	X	3.0
3. Answering the telephone, taking messages, notifying appropriate personnel.	X	3.0
4. Receiving, welcoming, and processing patients and directing them to appropriate medical personnel in health center.	X	3.0
5. Maintaining current records.	X	8.0
6. Accompanying child or adult to the Cambridge Hospital.	X	0.5
7. Measuring and recording the following:		
a. Height and weight	X	8.0
b. Temperature, pulse, respiration	X	0.5
c. Blood pressure.	Y	---
8. Performing the following tests:		
a. Tine test	X	3.0
b. Eye test	X	0.5
c. Ear test	X	0.5
d. Urine test	X	3.0
e. Hematocrit	X	8.0
f. Other.	Y	---
9. Participating in weekly conferences with other health workers in the health center.	X	3.0
10. Making rounds in Headstart program:		
a. Take care of minor illnesses	X	8.0
b. Report more serious illnesses to public health nurses or supervisors	X	3.0
c. Make referrals to Cambridge Hospital.	X	0.5
11. Assisting nurse or physician in treatment or examination of patient.	X	3.0
12. Making home visits relating to health problems in Headstart children.	Y	---
13. Other functions.	X	18.0
14. Teaching.	Y	---
15. Waiting for work.	X	5.0
16. Lunch and breaks.	X	10.0

[1] X indicates the function is performed.

[2] Y indicates the function is not performed.

Table No. 50 Neighborhood Health Worker's Responses to the Questions "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	(1) QUESTION	R.N.	NURSES' AIDE	SECRETARY	NEIGHBORHOOD HEALTH WORKER
1. a. Straightening up, cleaning the clinic area	U	----	----	----	X[2]
	S	----	----	----	X
b. Cleaning used equipment and instruments	U	----	----	----	----
	S	----	----	----	----
c. Putting away supplies and equipment.	U	----	----	----	X
	S	----	----	----	X
2. Booking appointments.	U	----	----	----	X
	S	----	----	----	X
3. Answering the telephone, taking messages, notifying appropriate personnel.	U	X	X	X	X
	S	X	X	X	X
4. Receiving, welcoming, and processing patients and directing them to appropriate medical personnel in health center.	U	X	X	X	X
	S	X	X	X	X
5. Maintaining current records.	U	----	----	----	X
	S	----	----	----	X
6. Accompanying child or adult to the Cambridge Hospital.	U	----	----	----	X
	S	----	----	----	X
7. Measuring and recording the following: a. Height and weight	U	----	----	----	X
	S	----	----	----	X
b. Temperature, pulse, respiration	U	----	----	----	X
	S	----	----	----	X
c. Blood pressure.	U	----	----	----	X
	S	----	----	----	X
8. Performing the following tests: a. Tine test	U	----	----	----	X
	S	----	----	----	X
b. Eye test	U	----	----	----	X
	S	----	----	----	X
c. Ear test	U	----	----	----	X
	S	----	----	----	X

1. "U" means usually;
"S" means should.

2. X indicates the response.

Table No. 50 Neighborhood Health Worker's Responses to Questions "Who Usually Performs This Function?" and "Who Should Perform This Function?"

FUNCTIONS	QUESTION (1)	R.N.	NURSES' AIDE	SECRETARY	NEIGHBORHOOD HEALTH WORKER
d. Urine test	U	----	----	----	X
	S	----	----	----	X
e. Hematocrit	U	----	----	----	X
	S	----	----	----	X
f. Other.	U	----	----	----	X
	S	----	----	----	X
9. Participating in weekly conferences with other health workers in the health center.	U	X	X	----	X
	S	X	X	----	X
10. Making rounds in Headstart program: a. Take care of minor illnesses	U	----	----	----	X
	S	----	----	----	X
b. Report more serious illnesses to public health nurses or supervisors	U	----	----	----	X
	S	----	----	----	X
c. Make referrals to Cambridge Hospital.	U	----	----	----	X
	S	----	----	----	X
11. Assisting nurse or physicians in treatment or examination of patient.	U	----	----	----	X
	S	----	----	----	X
12. Making home visits relating to health problems in Headstart children.	U	----	----	----	X
	S	----	----	----	X
13. Other functions.	U	----	----	----	X
	S	----	----	----	X
14. Teaching.	U	----	----	----	----
	S	----	----	----	----

1. "U" means usually;
   "S" means should.

2. X indicates the response.

Table No. 51 Percentage Distribution of General Nursing Personnel, Ward Secretaries, Operating Room Personnel, Psychiatry Department Personnel, X-ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician and Neighborhood Health Worker by Age[1] and Sex[1]

Age	General Nursing				Ward Sec.	Operating Room			Psychiatry Department		X-ray	Inha-lation	Labo-ratory	E K G	
	R.N.	L.P.N.	N.A.	Ord.		R.N.	Tech.	N.A.	R.N.	ATT.	Tech.	Tech.	Tech.	Tech.	N.H.W.
18-25 years	44.7	80.0	30.8	62.5	50.0	75.0	71.4	---	66.7	100.0	50.0	80.0	33.3	---	---
26-40 years	36.8	20.0	23.1	25.0	---	25.0	28.6	---	33.3	---	41.7	---	33.3	---	---
41-55 years	15.8	---	23.1	---	50.0	---	---	---	---	---	---	20.0	33.3	100.0	---
56 and over	2.6	---	23.1	12.5	---	---	---	100.0	---	---	8.3	---	---	---	100.0
Sex: Female	100.0	100.0	100.0	---	100.0	100.0	42.9	100.0	100.0	14.3	66.7	60.0	100.0	100.0	100.0
Male	---	---	---	100.0	---	---	57.1	---	---	85.7	33.3	40.0	---	---	---

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[1] May not add up to 100 percent because of rounding.

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Table No. 52 Percentage Distribution of Registered Nurses, Licensed Practical Nurses, Nurses' Aides, Orderlies and Ward Secretaries by Level of Education and Occupational Training

Education and Occupational Training	R.N.	L.P.N.	Nurses' Aide	Orderly	Ward Secretaries
High School: 1 - 4 years	---	---	37.0	12.5	33.3
Diploma received or equivalent	100.0	100.0	63.0	87.5	66.7
College: 1 - 4 years (and scattered courses)	31.6	30.0	11.1	50.0	16.7
Degree received	10.5	---	---	25.0	---
Graduate School	5.3	---	---	12.5	---
3-year Diploma Nursing School: not completed	5.3	---	7.4	---	---
completed	92.1	---	---	---	---
L.P.N. School: not completed	---	---	7.4	---	---
completed: 15-month	2.6	70.0	---	---	---
18-month	---	30.0	---	---	---
Military Training Course	---	---	3.7	25.0	---
Foreign Training Course	---	---	18.5	---	---
Formal Nurses' Aide Training Course: at another hospital	---	---	14.8	---	---
at Cambridge Hospital	---	---	14.8	25.0	---
Informal On-the-Job Training: at another hospital	---	---	33.3	37.5	---
at Cambridge Hospital	---	---	66.7	75.0	100.0
Typing, secretarial training, MDTA (Manpower Devel. Training Act)	----	---	---	---	33.3
Specialized Training in Medical Area	21.1	10.0	3.7	25.0	----
Associate's Degree	2.6	----	----	----	----
Professional Certification: R.N.	94.7	----	----	----	----
L.P.N.	----	70.0	----	----	----
L.P.N. by waiver	----	----	11.1	----	----
Foreign certification	----	----	11.1	----	----
None exists for occupation	----	----	77.8	100.0	100.0
No	5.3	30.0	----	----	----
Presently enrolled in educational institution	5.3	10.0	14.8	25.0	33.3
Expects to enroll in educational institution	----	----	3.7	----	----

Table No. 53 **Percentage Distribution of Operating Room Personnel and Psychiatry Department Personnel by Level of Education and Occupational Training**

Education and Occupational Training	Operating Room			Psychiatry Department	
	R.N.	Technician	Nurses' Aide	R.N.	Attendant
High School: Diploma received	100.0	100.0	100.0	100.0	100.0
College: 1 - 4 years (or scattered courses)	----	85.7	----	33.3	100.0
Degree received	----	57.1	----	----	42.9
Graduate School	----	14.3	----	----	----
3-year Diploma Nursing School: not completed	----	14.3	----	----	----
completed	100.0	----	----	66.7	----
Military Training Course	----	14.3	----	----	14.3
Medical School: not completed	----	14.3	----	----	----
Surgical Technician Training School: not completed	----	14.3	----	----	----
On-the Job Training: at another hospital	25.0	14.3	----	100.0	57.1
at Cambridge Hospital	50.0	85.7	100.0	100.0	100.0
Associate's Degree	----	----	----	33.3	----
Professional Certification: R.N.	100.0	----	----	100.0	----
L.P.N. by waiver	----	----	100.0	----	----
None exists for occupation	----	100.0	----	----	100.0
Presently enrolled in educational institution	----	28.6	----	----	42.9
Expects to enroll in educational institution	----	----	----	----	57.1

Table No. 54 Percentage Distribution of X-ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician and Neighborhood Health Worker by Educational and Occupational Training

Educational and Occupational Training	X-ray Technician	Inhalation Therapy Tech.	Lab Technician	EKG Technician	Neigh.Health Worker
High School: 1 - 4 years	----	----	----	----	100.0
Diploma received or equivalent	100.0	100.0	100.0	100.0	----
College: 1 - 4 years (or scattered courses)	33.3	40.0	50.0	----	----
Degree received	----	----	16.7	----	----
3-year Diploma Nursing School: completed	----	20.0	----	----	----
Nurses' Aide Training	----	----	----	----	100.0
Military Training Course	25.0	20.0	----	----	----
Foreign Training Course	----	----	----	----	----
Specialized Training in Medical Area	8.3	----	8.3	----	----
Associate's Degree: not completed	8.3	----	----	----	----
College-based, X-ray Training Program: not completed	33.3	----	----	----	----
completed	58.3	----	----	----	----
Hospital-based Training Program	16.7	----	----	----	100.0
Technical School	----	----	16.7	----	----
Medical Technician (or Technologist) course: not completed	----	----	16.7	----	----
completed	----	----	16.7	----	----
Lab Technician Course	----	----	25.0	----	----
Formal On-the-Job Training Course	----	----	25.0	----	----
Informal On-the Job Training: at another hospital	----	----	8.3	----	----
at Cambridge Hospital	----	80.0	33.3	100.0	----
Professional Certification: Civil Service	----	----	----	100.0	----
R.N.	----	20.0	----	----	----
R.T., I.R.T., A.R.R.T.	66.7	----	----	----	----
Still in training	33.3	----	----	----	----
General lab diploma	----	----	8.3	----	----
ASCP	----	----	8.3	----	----
None exists for occupation	----	80.0	----	----	100.0
No	----	----	83.3	----	----
Presently enrolled in educational institution	41.7	20.0	16.7	----	100.0

Table No. 55 Percentage Distribution of General Nursing Personnel, Ward Secretaries, Operating Room Personnel, Psychiatry Department Personnel, X-ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician and Neighborhood Health Worker by Number of Years at Present Occupation[1]

Years Employed at Present Occupation	General Nursing				Ward	Operating Room			Psychiatry Department		X-ray	Inhalation Therapy	Laboratory	EKG	Neigh. Health
	R. N.	L.P.N.	N. A.	Ord.	Sec.	R.N.	Tech.	N.A.	R.N.	ATT.	Tech.	Tech.	Tech.	Tech.	Worker
Less than 1 year	5.3	50.0	3.7	50.0	100.0	---	42.9	---	---	57.1	16.7	60.0	41.7	---	---
1-3 years	34.2	30.0	14.8	12.5	---	50.0	28.6	---	100.0	28.6	---	---	8.3	---	100.0
4-6 years	15.7	---	22.2	12.5	---	25.0	28.6	---	---	14.3	25.0	20.0	16.7	---	---
7-9 years	13.2	10.0	14.8	---	---	---	---	---	---	---	16.7	20.0	---	---	---
10-14 years	7.9	10.0	25.9	12.5	---	---	---	---	---	---	---	---	---	100.0	---
15 years and over	23.7	---	18.5	12.5	---	25.0	---	100.0	---	---	8.3	---	33.3	---	---
Not Applicable: in training	---	---	---	---	---	---	---	---	---	---	33.3	---	---	---	---
Years Employed at Cambridge Hospital															
Less than 1 year	31.6	90.0	37.0	62.5	100.0	75.0	57.1	---	33.3	71.4	16.7	80.0	50.0	---	---
1-3 years	28.9	10.0	11.1	25.0	---	---	28.6	---	66.7	28.6	---	---	8.3	---	100.0
4-6 years	10.5	---	3.7	---	---	25.0	14.3	---	---	---	41.7	---	25.0	---	---
7-9 years	7.9	---	7.4	---	---	---	---	---	---	---	8.3	20.0	8.3	---	---
10-14 years	5.3	---	29.6	---	---	---	---	---	---	---	---	---	8.3	100.0	---
15 years and over	15.7	---	11.1	12.5	---	---	---	100.0	---	---	---	---	---	---	---
Not Applicable: still in training	---	---	---	---	---	---	---	---	---	---	33.3	---	---	---	---

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[1] May not add up to 100 percent because of rounding.

Table No. 56 Percentage Distribution of General Nursing Personnel, Ward Secretaries, Operating Room Personnel, Psychiatry Department Personnel, X-ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technicians and Neighborhood Health Worker by Employment in Any Other Health-Related Occupations [1]

Employment at Any Other Health-Related Occupations	General Nursing				Ward Sec.	Operating Room			Psychiatry Department		X-ray	Inhalation	Laboratory	E K G	
	R.N.	L.P.N.	N.A.	Ord.		R.N.	Tech.	N.A.	R.N.	Att.	Tech.	Tech.	Tech.	Tech.	N.H.W.
None	60.5	50.0	51.9	37.5	50.0	100.0	14.3	100.0	33.3	85.7	25.0	40.0	50.0	100.0	----
Aide	26.3	10.0	----	----	-----	-----	-----	----	----	----	----	-----	-----	-----	100.0
Orderly	----	----	----	----	-----	-----	28.6	----	----	----	----	-----	-----	-----	----
Volunteer	7.8	30.0	11.1	12.5	16.7	-----	-----	----	66.7	----	33.3	-----	-----	-----	----
Mental health or psychiatric worker	2.6	----	11.1	----	-----	-----	-----	----	----	----	----	-----	-----	-----	----
Community health worker	----	----	3.7	----	-----	-----	-----	----	----	----	----	-----	-----	-----	----
Non-medical hospital-based occupation (eg., sec., clerk)	5.2	----	7.4	12.5	33.3	-----	14.3	----	----	----	8.3	-----	-----	-----	----
Worked in M.D.'s office	----	10.0	7.4	12.5	-----	-----	-----	----	----	----	----	20.0	8.3	-----	----
Military hospital	----	----	7.4	25.0	-----	-----	-----	----	----	----	----	-----	-----	-----	----
Medical Corpsman	----	----	----	----	-----	-----	14.3	----	----	14.3	25.0	20.0	-----	-----	----
Research	----	----	----	----	-----	-----	-----	----	----	14.3	----	-----	16.7	-----	----
Surgical Tech./Orderly	----	----	----	----	-----	-----	-----	----	----	----	8.3	-----	-----	-----	----
Inhalation Therapist	----	----	----	----	-----	-----	-----	----	----	----	8.3	-----	-----	-----	----
Dark-Room Technician	----	----	----	----	-----	-----	-----	----	----	----	8.3	-----	-----	-----	----
R.N.	----	----	----	----	-----	-----	-----	----	----	----	----	20.0	-----	-----	----
Social Worker/Mental Health	----	----	----	----	-----	-----	14.3	----	----	----	----	-----	-----	-----	----
First-Aid Instructor	----	----	----	----	-----	-----	14.3	----	----	----	----	-----	-----	-----	----
Teaching in Medical Field	----	----	----	----	-----	-----	-----	----	----	----	----	-----	8.3	-----	----
Embalming	----	----	----	----	-----	-----	-----	----	----	----	----	-----	8.3	-----	----
Practical Nurse	----	----	7.4	----	-----	-----	-----	----	----	----	----	-----	-----	-----	----
Operating Room Tech.	----	----	----	12.5	-----	-----	-----	----	----	----	----	-----	-----	-----	----
Other	2.6	----	3.7	----	-----	-----	-----	----	----	----	----	-----	16.7	-----	----

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[1] May not add up to 100 percent because of personnel having worked in more than one field or because of rounding.

Table No. 57 Percentage Distribution of General Nursing Personnel, Ward Secretaries, Operating Room Personnel, Psychiatry Department Personnel, X-ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician, and Neighborhood Health Worker by Type of Orientation That They Received[1]

Orientation	General Nursing				Ward Sec.	Operating Room			Psychiatry Department		X-ray	Inhalation	Laboratory	EKG	
	R.N.	L.P.N.	N.A.	Ord.		R.N.	Tech.	N.A.	R.N.	Att.	Tech.	Tech.	Tech.	Tech.	N.H.W.
Length of Orientation:															
less than 1 hour	2.6	---	---	12.5	---	---	14.3	---	---	---	---	---	---	---	---
a few hours	---	10.0	3.7	12.5	100.0	---	---	---	33.3	85.7	100.0	80.0	---	---	---
1-4 days	26.3	20.0	40.7	37.5	---	---	14.3	---	---	---	---	---	16.7	---	---
1 week	15.8	10.0	22.2	25.0	---	---	---	---	---	---	---	---	8.3	---	---
2-3 weeks	13.2	---	3.7	---	---	100.0	42.9	---	---	---				100.0	100.0
1-2 months	---	---	---	---	---		28.6	100.0	---	---	---	---	8.3	---	---
6 months	---	---	---	---	---	---	---	---		---	---	---	8.3	---	---
none	42.1	60.0	29.6	12.5	---	---	---	---	---	---	---	20.0	58.3	---	---
hired at formation of ward	---	---	---	---	---	---	---	---	66.7	14.3	---	---	---	---	---
Formal Classes by specific "trainer": yes	13.2	---	3.7	25.0	---	---	57.1	---	33.3	---	25.0	---	8.3	---	100.0
no	86.8	100.0	96.3	75.0	100.0	100.0	42.9	100.0	66.7	100.0	75.0	100.0	91.7	100.0	---
Introduction to hospital, ward, policies, supervisors by a specific "trainer:" yes	---	---	51.9	37.5	---	---	57.1	---	---	---	---	---	---	---	---
no	100.0	100.0	48.1	62.5	100.0	100.0	42.9	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Informal introduction to hospital, ward, policies, by supervisor or nurses: yes	63.1	60.0	22.2	50.0	---	---	57.1	---	33.3	100.0	---	80.0	25.0	100.0	100.0
no	36.8	40.0	77.8	50.0	100.0	100.0	42.9	100.0	66.7	---	100.0	20.0	75.0	---	---
Assigned to follow fellow worker in his tasks: yes	15.8	10.0	40.7	25.0	100.0	100.0	100.0	---	---	---	100.0	---	16.7	100.0	---
no	84.2	90.0	59.3	75.0	---	---	---	100.0	100.0	100.0	---	100.0	83.3	---	100.0
Use of movies and pamphlets in instruction: yes	---	---	---	---	---	---	---	---					16.7	---	---
no	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	83.3	100.0	100.0
Regular meetings held to orient new employees: yes	---	---	---	---	---	---	---	---	33.3		---	---	---	---	---
no	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	66.7	100.0	100.0	100.0	100.0	100.0	100.0

1. May not add to 100 percent because of rounding.

Table No. 58 Percentage Distribution of General Nursing Personnel and Ward Secretaries by What They Feel Their Orientation and Training Should Be [1]

What Orientation Should Be		General Nursing				Ward Sec.
		R.N.	L.P.N.	N.A.	Ord.	
a. Formal classes by specific "trainer."	yes	26.3	20.0	11.1	37.5	---
	no	73.7	80.0	88.9	62.5	---
b. Introduction to hospital, ward, policies, supervisors by specific "trainer" (informal).	yes	50.0	30.0	85.2	100.0	---
	no	50.0	70.0	14.8	---	---
c. Informal introduction to the above by supervisor, head nurse or nurse.	yes	26.3	60.0	3.7	25.0	---
	no	73.7	40.0	96.3	75.0	---
d. Assigned to follow another worker in some occupation.	yes	13.2	30.0	25.9	12.5	---
	no	86.8	70.0	74.1	87.5	---
e. Job description book should be given to new employee.	yes	---	30.0	---	---	---
	no	100.0	70.0	---	---	---
f. No orientation is necessary.						
g. Length of orientation should be:						
less than 1 day		---	10.0	---	---	---
1 day		---	30.0	---	25.0	16.7
a few days		2.7	---	11.1	---	66.7
1 week		18.9	10.0	33.3	37.5	16.7
2 weeks		29.7	10.0	---	12.5	---
1 month		10.8	10.0	---	---	---
depends on individual		2.7	20.0	22.2	25.0	---
no answer given		35.2	10.0	33.3	---	---
What Training Methods Should Be for RN's, L.P.N.'s, N.A.'s, Orderlies, and Ward Secretaries						
Training methods for R.N.'s should include:						
a. 2-year Associate's program is sufficient.		24.3	---	---	---	---
b. 3-year diploma program is best for "bedside nursing".		35.1	---	---	---	---
c. 3-year diploma program is adequate for any nurse.		10.8	---	---	---	---
d. 4-year college program is best for any nurse.		24.3	---	---	---	---
e. 4-year college program is best for teaching or administrative nursing.		35.1	---	---	---	---
f. R.N.'s should be required to take refresher courses periodically regardless of previous training.		13.5	---	---	---	---
g. 3-year diploma program followed by a 4-year college program.		8.1	---	---	---	---
h. Specialized training in addition to the above.		16.2	---	---	---	---
i. Experience is more important than training (a. or c., above ordinarily is adequate).		8.1	---	---	---	---

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[1] May not add up to 100 percent because more than one suggestion might have been given or because of rounding.

Table No. 58 Percentage Distribution of General Nursing Personnel and Ward Secretaries by What They Feel Their Orientation and Training Should Be [1]

What Training Methods Should Be for RN's, L.P.N.'s, N.A.'s, Orderlies, and Ward Secretaries	General Nursing				Ward Sec.
	R.N.	L.P.N.	N.A.	Ord.	
Training Methods for L.P.N.'s:					
a. Balance of formal classes and on-the-job training in present L.P.N. schools is adequate.	---	50.0	---	---	---
b. Should be more formal classes.	---	10.0	---	---	---
c. Should be fewer formal classes.	---	10.0	---	---	---
d. Program should be longer, more detailed.	---	30.0	---	---	---
e. Other: R.N. school, psychiatric experience.	---	20.0	---	---	---
f. Experience is most important.	---	40.0	---	---	---
Training Methods for Nurses' Aides and Orderlies:					
a. A combination of formal classes and O.J.T. by a specific trainer.	---	---	81.5	75.0	---
b. O.J.T. is sufficient.	---	---	22.2	25.0	---
c. Should learn the "why" in addition to the "how".	---	---	18.5	37.5	---
d. Should be trained to do more functions.	---	---	22.2	62.5	---
e. Length of training should be:					
1 week	---	---	7.4	---	---
2-3 weeks	---	---	14.8	62.5	---
1 month	---	---	7.4	25.0	---
more than one month	---	---	3.7	---	---
flexible	---	---	18.5	12.5	---
no answer given.	---	---	48.1	---	---
g. Should include work (1 week) in Emergency Ward, rotation to all floors.	---	---	---	12.5	---
h. Should include manual for medical terminology.	---	---	---	12.5	---
Training Methods for Ward Secretaries:					
a. A manual is needed to outline routine, medical terminology, sample charts, and records, etc.	---	---	---	---	83.3
b. O.J.T. alone is sufficient.	---	---	---	---	50.0
c. Length of training should be:					
1 day	---	---	---	---	16.7
2 days	---	---	---	---	66.7
1 week.	---	---	---	---	16.7

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[1] May not add up to 100 percent because more than one suggestion might have been given or because of rounding.

Table No. 59 Percentage Distribution of Operating Room Personnel, Psychiatry Department Personnel, X-Ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician, and Neighborhood Health Worker by What They Feel Their Orientation and Training Should Be

	OPERATING ROOM			PSYCHIATRY DEPARTMENT		X-RAY	INHA-LATION	LABO-RATORY	EKG	
WHAT ORIENTATION SHOULD BE	R.N.	TECH.	N.A.	R.N.	ATT.	TECH.	TECH.	TECH.	TECH.	NEIGHBORHOOD HEALTH WORKER
a. Orientation at hospital is adequate.	100.0	42.9	---	100.0	100.0	---	---	---	---	---
b. Should include orientation to hospital in general.	25.0	---	---	---	---	---	---	---	---	---
c. Formal classes should be held:										
in hospital	---	---	---	---	---	91.7	---	50.0	---	100.0
at special school.	---	---	---	---	---	---	---	25.0	---	---
d. Practical Experience in conjunction with formal classes.	---	---	---	---	---	---	---	25.0	---	---
e. Assigned to follow a fellow worker to learn your tasks.	---	---	---	---	---	---	---	58.3	---	---
f. Specialized training in Special Procedures should be given.	---	---	---	---	---	8.3	---	---	100.0	---
WHAT TRAINING PROGRAMS SHOULD BE										
TRAINING METHODS FOR O.R. R.N.:										
a. 3 or 4 years program - not 2 years - because no exposure to O.R. work.	75.0	---	---	---	---	---	---	---	---	---

Table No. 59 Percentage Distribution of Operating Room Personnel, Psychiatry Department, Personnel, X-Ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician, and Neighborhood Health Worker by What They Feel Their Orientation and Training Should Be

	OPERATING ROOM			PSYCHIATRY DEPARTMENT		X-RAY	INHA-LATION	LABO-RATORY	EKG	
WHAT TRAINING PROGRAMS SHOULD BE	R.N.	TECH.	N.A.	R.N.	ATT.	TECH.	TECH.	TECH.	TECH.	NEIGHBORHOOD HEALTH WORKER
b. Most of O.R. work must be picked up by experience.	75.0	---	---	---	---	---	---	---	---	---
c. Two-month intensive training in diploma school is adequate.	25.0	---	---	---	---	---	---	---	---	---
d. Any program (2,3,4,yrs)	25.0	---	---	---	---	---	---	---	---	---
e. Hospital to train O.J.T.	75.0	---	---	---	---	---	---	---	---	---
TRAINING METHODS FOR SURGICAL TECHNICIAN										
a. Formal School (OJT and classes).	---	28.6	---	---	---	---	---	---	---	---
b. Hospital-based combination of "show and do" classes for anatomy, technique, etc.	---	42.9	---	---	---	---	---	---	---	---
c. Structured, but flexible OJT.	---	28.6	---	---	---	---	---	---	---	---
d. Should include emergency procedures.	---	28.6	---	---	---	---	---	---	---	---
e. Need written procedures; required reading for anatomy, etc.	---	28.6	---	---	---	---	---	---	---	---
f. Need accreditation.	---	14.3	---	---	---	---	---	---	---	---

Table No. 59 Percentage Distribution of Operating Room Personnel, Psychiatry Department Personnel, X-Ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician, and Neighborhood Health Worker by What They Feel Their Orientation and Training Should Be

WHAT TRAINING PROGRAMS SHOULD BE	OPERATING ROOM			PSYCHIATRY DEPARTMENT		X-RAY	INHA-LATION	LABO-RATORY	EKG	
	R.N.	TECH.	N.A.	R.N.	ATT.	TECH.	TECH.	TECH.	TECH.	NEIGHBORHOOD HEALTH WORKER
TRAINING METHODS FOR SURGICAL AIDE										
a. Mostly OJT with consistent person, classes for sterile technique.	---	---	100.0	---	---	---	---	---	---	---
TRAINING METHODS FOR PSYCHIATRY DEPARTMENT R.N.										
a. College program	---	---	---	33.3	---	---	---	---	---	---
b. The program does not matter; adequate supervision and experience are more important.	---	---	---	66.7	---	---	---	---	---	---
TRAINING PROGRAM FOR PSYCHIATRY DEPARTMENT ATTENDANT										
a. A combination of OJT, discussions, "classes" with psychiatrists, adequate supervision.	---	---	---	---	100.0	---	---	---	---	---
b. Need more classes and supervision.	---	---	---	---	14.3	---	---	---	---	---
c. Need introductory manual and reading list.	---	---	---	---	42.9	---	---	---	---	---
d. Training is just accumulation of experience.	---	---	---	---	28.6	---	---	---	---	---

Table No. 59 Percentage Distribution of Operating Room Personnel, Psychiatry Department Personnel, X-Ray Technicians, Inhalation Therapy Technicians, Laboratory Technicians, EKG Technician, and Neighborhood Health Worker by What They Feel Their Orientation and Training Should Be

	OPERATING ROOM			PSYCHIATRY DEPARTMENT		X-RAY*	INHA-LATION	LABO-* RATORY	EKG	
WHAT TRAINING PROGRAMS SHOULD BE	R.N.	TECH.	N.A.	R.N.	ATT.	TECH.	TECH.	TECH.	TECH.	NEIGHBORHOOD HEALTH WORKER
e. Length of training:										
varies with individual	---	---	---	---	28.6	---	---	---	---	---
1 month	---	---	---	---	14.3	---	---	---	---	---
3 months	---	---	---	---	28.6	---	---	---	---	---
4 months	---	---	---	---	28.6	---	---	---	---	---
TRAINING PROGRAM FOR INHALATION TECHNICIAN										
a. "Show and tell" OJT.	---	---	---	---	---	---	100.0	---	---	---
b. Classwork for anatomy, physiology.	---	---	---	---	---	---	40.0	---	---	---
c. Manuals for terminology, theory.	---	---	---	---	---	---	20.0	---	---	---
TRAINING PROGRAM FOR EKG TECHNICIAN										
a. OJT - how to apply and run machines, no theory.	---	---	---	---	---	---	---	---	100.0	---
TRAINING PROGRAM FOR NEIGHBORHOOD HEALTH WORKER										
a. Two weeks training and class at the hospital	---	---	---	---	---	---	---	---	---	100.0

* The X-Ray and Lab Technicians were not asked questions on this subject.

Table No. 60 Percentage Distribution[1] of Paramedical Personnel by the Formal Level of Education They Feel Should Be Required in Their Field

Formal Level of Education that They Feel Should Be Required in Their Field	GENERAL NURSING				WARD	OPERATING ROOM			PSYCHIATRY		X-RAY	INHAL. THERAPY TECH.	LAB TECH.	EKG TECH.	NEIGH HEALTH WORKER
	R.N.	L.P.N.	N.A.	ORD.	SECR.	R.N.	TECH.	N.A.	R.N.	ATT.	TECH.				
1. No requirement	----	----	70.4	87.5	50.0	----	42.9	----	---	71.4	----	----	---	----	----
2. Minimum age	----	----	----	----	----	----	----	----	---	----	16.7	----	---	----	----
3. Grammar School	----	----	----	----	16.7	----	----	----	---	----	----	----	8.3	----	----
4. High School -some	----	----	----	----	----	----	----	----	---	----	----	----	---	----	100.0
5. High School degree or demonstrated equivalent in terms of maturity, intelligence,etc.	----	----	----	----	----	----	----	----	---	----	----	----	---	----	----
6. High School degree	----	10.0	29.6	12.5	33.3	100.0	57.3	100.0	---	----	----	100.0	8.3	100.0	----
7. College - some	----	----	----	----	----	----	----	----	---	----	----	----	16.7	----	----
8. College - some - with courses in psychology or sociology	----	----	----	----	----	----	----	----	---	14.3	----	----	---	----	----
9. College degree	28.9	----	----	----	----	----	----	----	---	14.3	----	----	50.0	----	----
10. Diploma School	52.6	70.0	----	----	----	100.0	----	----	33.3	----	----	----	---	----	----
11. Associate 's degree	23.7	----	----	----	----	----	----	----	---	----	25.0	----	---	----	----
12. High Schooland practical experience	----	----	----	----	----	----	----	----	---	----	----	----	16.7	----	----
13. High School (to enter, 9,10,11)	89.5	10.0	----	----	----	----	----	----	---	----	----	----	---	----	----
14. Specialized training (beyond 9,10, 11)	10.5	10.0	----	----	----	----	----	----	---	----	----	----	---	----	----
15. Hospital-based training program	----	----	----	----	----	----	----	----	---	----	66.7	----	---	----	----
16. College-based training program	----	----	----	----	----	----	14.3	----	---	----	41.7	20.0	8.3	----	----

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1. May not add to 100 percent because more than one answer was given in some cases.

Table No. 60 Percentage Distribution[1] of Paramedical Personnel by the Formal Level of Education They Feel Should Be Required in Their Field

Formal Level of Education They Feel Should Be Required in Their Field	GENERAL NURSING				WARD	OPERATING ROOM			PSYCHIATRY		X-RAY TECH.	INHAL. THERAPY	LAB TECH.	EKG TECH.	NEIGH. HEALTH WORKE
	R.N.	L.P.N.	N.A.	ORD.	SECR.	R.N.	TECH.	N.A.	R.N.	ATT.					
17. High School (to enter 15,16, or Associate's degree program)	----	----	----	----	----	----	----	----	----	----	91.7	----	----	----	----
18. High School degree or demonstrated maturity and 15 or 16	----	----	----	----	----	----	----	----	----	----	8.3	----	----	----	----
19. College or specialized training program and practical experience	----	----	----	----	----	----	----	----	----	----	----	----	8.3	----	----
20. Diploma School, Associate's degree or college degree	----	----	----	----	----	----	----	----	66.7	----	----	----	----	----	----
21. Other	----	20.0	----	----	----	----	----	----	----	----	16.7	----	----	----	----

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1. May not add to 100 percent because more than one answer was given in some cases.

Table No. 61 Percentage Distribution of Paramedical Personnel by Personal Qualities That They Feel Are Important in Their Field or Department[1]

Personal Qualities that are felt to be important	General Nursing				Ward Sec.	Operating Room			Psychiatry Department		X-ray	Inha-lation	Labo-ratory	EKG	Neigh-borhood Health
	R.N.	L.P.N.	N.A.	Ord.		R.N.	Tech.	N.A.	R.N.	Att.	Tech.	Tech.	Tech.	Tech.	Worker
like people, work well with sick people	40.5	40.0	59.3	62.5	---	---	---	---	33.3	28.6	50.0	40.0	16.7	100.0	100.0
patience	21.6	20.0	25.9	25.0	---	---	85.7	---	---	14.3	25.0	80.0	25.0	100.0	100.0
easy-going, even-tempered	8.1	20.0	7.4	---	---	---	---	---	---	---	---	---	---	---	100.0
emotional stability, maturity	29.7	10.0	14.8	37.5	---	25.0	14.3	---	100.0	28.6	33.3	---	---	---	---
compassion, sympathy, empathy	13.5	40.0	7.4	25.0	---	---	---	---	33.3	14.3	41.7	---	---	---	---
polite, neat in appearance	2.7	---	7.4	---	83.3	---	---	---	---	---	---	---	25.0	---	---
friendly, pleasant, cheerful, sense of humor	5.4	10.0	48.1	12.5	---	50.0	100.0	100.0	---	---	8.3	20.0	---	---	---
conscientious, dependable, cooperative	16.2	10.0	7.4	37.5	---	---	---	100.0	---	---	---	---	41.7	---	---
intelligence, perceptiveness	16.2	---	3.7	---	---	---	---	---	33.3	28.6	---	20.0	25.0	---	---
flexibility, adaptibility, innovative, diversified	2.7	---	---	---	---	---	---	---	---	---	8.3	---	---	---	---
common sense	---	---	7.4	25.0	---	---	---	---	33.3	---	---	---	---	---	---
efficient	---	---	---	---	33.3	---	14.3	---	---	---	---	---	---	---	---
responsible	---	---	---	---	33.3	25.0	14.3	---	---	---	---	---	---	---	---
discreet	---	---	---	---	33.3	---	---	---	---	---	---	---	---	---	---
communicate effectively	---	---	---	---	33.3	---	---	---	---	---	---	---	---	---	---
professional attitude	---	---	---	---	---	---	57.1	100.0	---	---	8.3	---	---	---	---
ethical	---	---	---	---	---	---	---	---	---	---	8.3	---	---	---	---
openness, warmth	---	---	---	---	---	---	---	---	---	57.1	---	---	---	---	---
objectivity	---	---	---	---	---	---	---	---	33.3	---	---	---	---	---	---
function well under pressure	---	---	---	---	---	25.0	28.6	---	---	---	---	---	---	---	---
interest in medicine	---	---	---	---	---	---	28.6	---	---	---	---	---	---	---	---
adept with hands	---	---	---	---	---	---	14.3	---	---	---	---	---	---	---	---
accuracy	---	---	---	---	---	---	---	---	---	---	---	---	25.0	---	---
none in particular	16.2	---	---	---	16.7	---	---	---	---	---	8.3	---	---	---	---

[1] May not add to 100 percent because more than one answer was given.

Table No. 62 Percentage Distribution[1] of Paramedical Personnel by the Occupational Level They Can Realistically Hope to Attain With Their Present Educational and Professional Training

Occupational Level They can Realistically Hope to Attain	General Nursing				Ward Sec.	Operating Room			Psychiatry Dept.		X-ray Tech.	Inhal. Therapy Tech.	Lab Tech.	EKG Tech.	Neigh. Health Worker
	R.N.	L.P.N.	N.A.	Ord.		R.N.	Tech.	N.A.	R.N.	Att.					
Can go higher, and would like to	29.7	30.0	----	----	----	25.0	----	----	66.7	----	33.3	----	33.3	----	----
Can go higher, but would not want to	54.1	40.0	3.7	----	----	75.0	----	----	33.3	----	33.3	----	----	----	----
Would have to leave hospital to reach a higher position	8.1	----	7.4	25.0	----	----	71.4	----	----	42.9	8.3	20.0	----	----	----
Dead end, but would like to go higher	2.7	----	63.0	25.0	----	----	71.4	----	----	100.0	8.3	20.0	16.7	----	----
Dead end, satisfied	5.4	30.0	33.3	62.5	100.0	----	28.6	100.0	----	----	----	60.0	50.0	100.0	100.0
Unsure	----	----	----	----	----	----	----	----	----	----	16.7	----	----	----	----

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[1] May not add to 100 percent because of rounding or because more than one answer was given.

Table No. 63 Percentage Distribution[1] of Paramedical Personnel by Extent to Which the Following Experiences Prepared Them for the Function They Are Presently Performing

Extent to Which the Following Prepared Them For Their Present Function	General Nursing				Ward Sec.	Operating Room			Psychiatry Department		X-ray	Inhalation Therapy	Laboratory	EKG	Neighborhood Health Worker
	R.N.	L.P.N.	N.A.	Ord.		R.N.	Tech.	N.A.	R.N.	Att.	Tech.	Tech.	Tech.	Tech.	
High School	4.1	---	---	5.8	---	---	6.0	5.0	---	---	---	---	10.9	---	---
College	4.1	---	---	4.0	---	---	4.0	---	---	17.9	9.5	1.3	12.3	---	---
Vocational/Technical Training	---	9.0	5.7	8.8	10.0	---	11.4	---	---	---	17.0	3.8	10.5	---	---
On-the-Job Training	0.5	5.0	22.0	41.9	57.0	---	36.4	30.0	---	25.7	29.5	71.2	19.5	20.0	---
Professional Training	39.2	37.5	4.6	---	---	46.3	---	---	23.3	---	13.5	---	12.7	---	---
Practical Experiences	49.7	41.5	58.3	38.1	26.0	53.8	41.4	65.0	56.7	37.5	27.0	13.8	31.8	80.0	100.0
Other	2.2	7.0	9.3	1.5	7.0	---	0.7	---	20.0	18.6	3.5	10.0	2.3	---	---

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[1] May not add to 100 percent because of rounding.

Table No. 64 Percentage Distribution[1] of Paramedical Personnel by Their Plans for Future Employment and Their Reasons

Future Plans and Reasons for them	General Nursing				Ward Sec.	Operating Room			Psychiatry Department		X-ray	Inhal-ation Therapy	Labo-ratory	EKG	Neig bor-hood Heal Work
	R.N.	L.P.N.	N.A.	Ord.		R.N.	Tech.	N.A.	R.N.	Att.	Tech.	Tech.	Tech.	Tech.	
Plan to remain at Cambridge Hospital	48.6	40.0	76.9	50.0	50.0	25.0	57.1	100.0	---	---	58.3	60.0	63.6	100.0	100.
Plan to leave	10.8	40.0	7.7	25.0	33.3	---	---	---	---	---	8.3	---	9.1	---	---
Plan to stay for the time being	24.3	20.0	15.4	25.0	---	75.0	42.9	---	100.0	100.0	25.0	40.0	18.2	---	---
No plans/unsure	16.2	---	---	---	16.7	---	---	---	---	---	8.3	---	9.1	---	---
Reasons for remaining:															
1. Like the work/people	43.2	50.0	65.4	50.0	33.3	75.0	57.1	---	---	---	50.0	40.0	54.5	100.0	100.
2. Convenience	21.6	---	11.5	12.5	33.3	---	---	---	---	---	---	---	---	---	---
3. Settled here	13.5	20.0	23.1	---	---	---	---	100.0	---	---	25.0	---	---	---	---
4. Employee/retirement benefits	2.7	---	30.8	---	---	---	---	---	---	---	8.3	20.0	9.1	---	---
5. Good salary	8.1	---	3.8	---	---	---	---	---	---	---	---	---	---	---	---
6. No place else to go	---	---	---	---	16.7	---	---	---	---	---	---	---	---	---	---
7. Need the money	---	---	---	---	33.3	---	---	---	---	---	---	---	---	---	---
8. Other/none	10.8	---	---	---	---	---	---	---	---	---	---	---	27.3	---	---
Reasons for leaving:															
1. Personal reasons	32.4	30.0	7.7	---	16.7	75.0	---	---	33.3	---	8.3	20.0	9.1	---	---
2. Temporary job	5.4	10.0	3.8	12.5	---	---	---	---	---	---	---	20.0	---	---	---
3. Dissatisfied with working conditions	---	20.0	---	12.5	---	---	---	---	---	---	---	---	---	---	---
4. Cannot advance any higher here	2.7	---	---	---	---	---	---	---		---	8.3	---	9.1	---	---
5. Move to another mental health occupation	---	---	---	---	---	---	---	---	33.3	42.9	---	---	---	---	---
6. Returning to school	---	---	11.5	12.5	16.7	---	28.6	---	33.3	42.9	---	---	---	---	---
7. Completion of alternate service (C.O.)	---	---	---	25.0	---	---	14.3		---	28.6	---	---	---	---	---
8. Dislike Civil Service System	---	---	---	---	---	---	---	---	---	---	25.0	---	---	---	---

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[1] May not add to 100 percent because of rounding or because more than one answer was given.

Table No. 65 Results From Observations of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderly
1. Straightening up and cleaning the following:				
(a) Patient's immediate furniture	X[1]	X	X	X
(b) Nurses' station	X			X
(c) Utility rooms	X		X	
(d) Treatment rooms	X			
(e) Nourishment center				
(f) Litters.				
2. Distributing mail and flowers.	X		X	
3. Doing departmental errands:				
(a) Going to pick up orthopedic equipment				
(b) Going to Central Supply or laundry			X	X
(c) Going to IBM or records office				
(d) Going to the Operating Room to help bring back a patient				
(e) Other.	X	X		
4. Doing errands for patients:				
(a) Making phone calls			X	
(b) Refilling water jugs			X	
(c) Preparing snacks or drinks from nourishment station			X	X
(d) Getting an extra pillow			X	X
(e) Other.			X	
5. (a) Giving and removing bedpans	X	X	X	X
(b) Assisting patient to use bedpan or urinal	X	X	X	
(c) Helping patient to and from bathroom.	X		X	
6. Making beds:				
(a) Unoccupied	X	X	X	X
(b) Occupied	X	X	X	X
(c) Post-operative.	X			
7. Answering patient calls.	X	X	X	X

[1] An "X" means that the observer saw this function being performed.

Table No. 65 Results From Observations of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderly
8. Admitting patients:				
(a) Completing clothes list or valuables list	X	X	X	
(b) Getting patient comfortably settled in bed		X	X	X
(c) Notifying intern.				
9. Discharging patient:				
(a) Returning clothes and valuables	X	X		
(b) Accompanying patient from floor		X	X	
(c) Other.	X			
10. Locating and setting up simple equipment:				
(a) Bed rails				
(b) Footboards	X			
(c) Sandbags				
(d) Heel coverlets	X		X	
(e) Other.				X
11. Taking patient				
(a) To x-ray		X	X	
(b) Taking lab specimens to lab.	X		X	
12. Assisting in moving patient to another floor.	X	X		
13. Measuring food and fluid intake and output and totaling:				
(a) Urine jugs	X		X	X
(b) Tube drainage	X			
(c) IV intake	X		X	
at the end of each shift.				
14. (a) Checking food trays	X	X	X	
(b) Delivering food trays	X	X	X	X
(c) Picking up food trays	X	X	X	X
(d) Feeding patients.	X			
15. Putting away the following:				
(a) Supplies	X	X	X	
(b) Equipment			X	
(c) Instruments.	X			

Table No. 65 Results From Observations of Registered Nurses, Licensed Practical Practical Nurses, Nurses' Aides and Orderlies

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderly
16. (a) Washing or soaking used equipment and supplies	X		X	
(b) Putting them on the cart to be returned to Central Supply to be autoclaved.	X	X		
17. Caring for deceased persons:				
(a) Notifying appropriate persons				
(b) Washing and tying patient	X	X		
(c) Removing IV's, tubes, dressings	X	X		
(d) Going to morgue to get litter			X	
(e) Taking deceased person to morgue.	X			
18. Giving information or directions to patients or visitors, or directing them to the correct source of information if it is impossible or inappropriate for you to answer the question.	X	X		X
19. (a) Collecting urine, stool or sputum specimens to be sent to lab	X	X	X	
(b) Performing routine tests: pre-meal glucose, guiac, albumen, Ph, hematocrits			X	
(c) Obtaining a culture.	X			
20. Giving routine morning care:				
(a) Assisting patient in bathing and dressing, brushing teeth	X	X	X	X
(b) Turning or positioning patient	X	X	X	X
(c) Giving massages or alcohol rubs	X			
(d) Walking with patients			X	
(e) Getting patient in and out of bed	X	X	X	X
(f) Assisting with range of motion or other exercises				
(g) Caring for bed sores with tincture of benzoine.	X		X	
21. Preparing patients for bed at night:				
(a) Changing or straightening linen	X		X	
(b) Turning or positioning patient	X		X	
(c) Assisting patient in washing and brushing teeth	X		X	
(d) Giving massages.				
22. Assisting patients with the following:				
(a) Walkers	X		X	X
(b) Wheelchairs	X		X	
(c) Crutches				

Table No. 65

Results From Observations of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderl
(d) Braces				
(e) Artificial limbs.			X	
23. Lifting patients on and off litters.	X			
24. Taking and recording:				
(a) Temperature	X	X	X	X
(b) Pulse	X	X	X	X
(c) Respiration rate	X	X	X	X
(d) Blood pressure	X	X	X	X
(e) Weight	X			
(f) Other: C.V.P.	X	X		
25. Assisting patient with Sitz bath.				
26. Applying or changing:				
(a) Ice bags	X			
(b) Hot water bottles				
(c) Ace bandages	X			
(d) Elastic stockings	X			
(e) Binders				
(f) Slings				
(g) Restraints.	X	X	X	
27. Giving cleansing treatments:				
(a) Enemas	X		X	
(b) Douches.				
28. Caring for wounds:				
(a) Dressing wounds	X	X		
(b) Irrigating wounds	X			
(c) Changing dressings.		X		
29. Feeding patient by tube.		X		
30. Caring for precaution or reverse precaution patients.				
31. (a) Setting up suture sets	X			
(b) Assisting doctor in removing sutures.	X			
32. (a) Doing cervical smears				
(b) Venereal disease smears.				
33. Assisting doctor in dermatology problems:				
(a) Wart removal				
(b) Skin biopsies.	X			

Table No. 65 Results From Observations of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderly
34. Caring for lacerations:				
(a) Wash laceration	X			
(b) Dress laceration.				
35. Using EKG equipment:				
(a) Bringing equipment to bedside	X		X	
(b) Setting up equipment	X			
(c) Attaching electrodes to patient	X			
(d) Operating EKG equipment.	X			
36. Drawing blood.	X			
37. (a) Ordering drugs from pharmacy	X			
(b) Receiving drugs				
(c) Putting drugs away.				
38. (a) Administering specified medication	X	X		
(b) Noting time and amounts on patients' charts.	X	X		
39. Performing functions related to oxygen masks, catheters:				
(a) Bringing equipment to bedside (O)	X			
(Cat)	X			
(b) Assembling (O)	X			
(Cat)	X			
(c) Inserting or applying (O)	X			
(Cat)	X			
(d) Adjusting or caring for equipment (O)	X	X	X	
(Cat)	X	X		
(e) Removing. (O)	X	X		
(Cat)	X	X		
41. Performing functions relating to IV's:				
a. Bringing equipment to bedside	X	X		X
b. Assembling	X	X		
c. Inserting needle, starting IV, hanging bottles	X			
d. Changing labeled bottles	X	X		
e. Discontinuing IV service.	X			

Table No. 65 Results From Observations of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderl
42. Assisting physicians during treatment and examination of patients:				
(a) Bringing equipment to bedside	X	X		X
(b) Preparing equipment or patient, assembling equipment	X	X		X
(c) Holding or restraining patient as necessary	X		X	
(d) Removing and cleaning equipment afterwards.	X			
43. Counting narcotics and barbiturates at the change of each shift.	X			
44. Observing and reporting to supervisor or physician:				
(a) Patient's condition	X	X		
(b) Patient's reaction to drugs, treatments, IV's				
(c) Significant incidents.	X			
45. (a) Serving emotional support to patients	X		X	X
(b) Entertaining patients (particularly children).			X	
46. Participating in cardiac arrest team:				
(a) Bringing equipment to bedside	X	X		X
(b) Call "444"				
(c) Start external cardiac massage				
(d) Use Ambu-bags, apply oxygen treatment, mouth-to-mouth resuscitation				
(e) Remove, clean equipment, restock emergency cart afterwards.	X			
47. Beginning preparations for patient scheduled for surgery:				
(a) Wash operative area				
(b) Shave operative area				
(c) Instruct patient not to eat or drink				

Table No. 65 Results From Observations of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderl
(d) Remove jewelry, bobby pins, dentures, or other prostheses.				
48. Filling out accident reports.	X			
49. Filling out: (a) Stamping lab slips and requisitions	X	X		
(b) Making necessary arrangements for x-rays, lab work.	X	X		
50. Checking and posting orders in MD order books.	X	X		
51. Checking off diet manual each shift.	X			
52. (a) Recommending (or)				
(b) Arranging for a consultation with medical specialists, social service, psychiatry, etc.				
53. Assigning and coordinating nursing activities, including making out daily assignment sheet.	X			
54. Evaluating quality of nursing care.				
55. Observing nursing care and visiting patients regularly to ensure proper nursing care.	X			
56. Regularly inspecting rooms and wards for cleanliness and comfort.	X			
57. Accompanying physicians on rounds.	X	X		
58. Investigating and adjusting complaints.	X			
59. Supervising preparation and maintenance of patient's clinical records.	X	X		
60. Giving change-of-shift report.	X	X		
61. Teaching.	X			
62. Research.				

Table No. 65 **Results From Observations of Registered Nurses, Licensed Practical Nurses, Nurses' Aides and Orderlies**

FUNCTIONS	R.N.	L.P.N.	Nurses' Aide	Orderl
63. Supervisory duties.	X	X		
64. Waiting for work.	X	X	X	X
65.-67. Labor, delivery and nursery were not observed.				
68. Caring for mother after delivery: (a) Encouraging mother to get up, take showers, force fluids, etc.				
(b) Checking perineum sutures, breasts, fundus, and flow of patient.		X		
69. Preparing babies or children for afternoon naps, including: (a) Bathe them				
(b) Change diapers			X	
(c) Giving them bottle, if applicable.	X			

Table No. 66 Results From Observation of Ward Secretaries

FUNCTIONS	WARD SECRETARY
1. Charting vital signs, intake and output, and weights.	X
2. Preparing admission and discharge records, transfer records.	X
3. Ordering central supplies as requested by Head Nurse.	X
4. Checking diet chart twice a day for correctness.	X
5. Inserting completed lab and X-ray slips in patients' charts.	X
6. Straightening up nurses' station.	X
7. Collecting and sorting patients' records; calling dispatcher to come to pick up old records if necessary.	X
8. Maintaining a current Kardex.	X
9. Answering questions, giving information to patients or visitors, or directing the questions to appropriate personnel.	X
10. Answering the telephone and the intercom, and notifying the appropriate personnel.	X
11. Making phone calls as requested by department staff or patients.	X
12. Ordering stationery supplies for the nursing unit.	X
13. Operating the addressograph.	X
14. Filling out condition sheets.	X
15. Booking appointments outside the hospital (e.g., a brain scan at Mt. Auburn Hospital); arranging for transportation.	

Table No. 66 Results From Observation of Ward Secretaries

FUNCTIONS	WARD SECRETARY
16. Putting away supplies and equipment, or making sure they are put away.	X
17. Other funtions:	
a. Ward secretary meeting.	
b. Taking patient down after discharge.	X
c. Going to Central Supply or lab; departmental errands.	
d. Distribute mail and flowers.	X
e. Training new ward secretaries.	X
18. Other: operating pneumatic tube.	X

Table No. 67 Results From Observations of Registered Nurses and Surgical Technicians in the Operating Room

FUNCTIONS	R.N.	Surgical Technician
1. Clean the following:		
(a) Dirty work rooms		
(b) Lavatories		
(c) Halls		
(d) Lounges		
(e) Litters.		
2. (a) Clean Operating Room area and equipment		X[1]
(b) Rewrap equipment to be sent to Central Supply		
(c) Remake room for next operation.		X
3. Care for used instruments after operation in the following ways:		
(a) Account for them	X	X
(b) Clean	X	X
(c) Rewrap		
(d) Autoclave.		
4. Use autoclave to sterilize instruments during operation.		
5. (a) Order supplies from storeroom or Central Supply		
(b) Receive supplies		
(c) Arrange them on shelves in proper storage position.		
6. (a) Check supplies and equipment after operation	X	
(b) Restock cabinets if necessary		
(c) Check for outdated supplies.		
7. (a) Type out schedules for the following day		
(b) List daily operations and daily patients.		
8(a) Make out list of supplies used during operation		
(b) Make out and record charges to patients		
(c) Distribute this information to the appropriate departments.		
9. Take dictation and type correspondence as necessary.		

1. An "X" means that the observer saw this function being performed.

Table No. 67 Results From Observations of Registered Nurses and Surgical Technicians in the Operating Room

FUNCTIONS	R.N.	Surgical Technician
10. (a) Answer phone calls and notify appropriate personnel	X	X
(b) Make phone calls as requested (including calling in medication order to the floor one hour preceding surgery).	X	
11. Keep clean, but unsterile equipment or instruments dust free.		
12. Go to surgical floor to pick up pre-operative patient by litter.		
13. Prepare surgical kits for upcoming operations: (a) Select, gather instruments		
(b) Put them on cart to be picked up by Central Supply.		
14. Wash and shave operative area of patient, going to the surgical floor prior to the operation.		
15. (a) Wash		
(b) Shave		
(c) Assist in sterilizing the operative area when the patient is properly positioned on the table.	X	
16. Place equipment and instruments in Operating Room for upcoming operations and arrange them according to the requirements of the operation.	X	X
17. (a) Move patient onto operating room table from litter	X	
(b) Position, secure, and drape patient as necessary.	X	
18. Aid surgical team to don gowns and gloves.	X	X
19. Adjust the following during operation:		
(a) Lights	X	
(b) Suction	X	
(c) Oxygen equipment	X	
(d) Tables	X	
(e) Other.	X	

Table No. 67 Results From Observations of Registered Nurses and Surgical Technicians in the Operating Room

FUNCTIONS	R.N.	Surgical Technician
20. Leave Operating Room during operation:		
(a) To obtain additional supplies, instruments	X	
(b) To order additional units of blood, glucose plasma, or saline		
(c) Arrange to have an X-ray or a lab test done.		
21. Obtain a culture during an operation.		
22. Accept, label and record all specimens received from surgeon.	X	
23. Set up and adjust a cautery under surgeon's directions.	X	
24. Care for a deceased person:		
(a) Notify appropriate personnel		
(b) Tie and pad person		
(c) Remove IV's and dressings		
(d) Take person to morgue.		
25. (a) Assist in moving post-operative patient from operating table to litter	X	X
(b) Assist in moving litter to recovery room.	X	X
26. Keep track of needles and instruments used during operation.	X	X
27. Assist in sponge count after operation.	X	X
28. (a) Hand instrument and supplies to surgeon		X
(b) Hold retractors		X
(c) Cut sutures as directed during operation.		X
29. Assist surgeon or anesthesiologist in administering:		
(a) Plasma		
(b) Blood		
(c) Glucose		
(d) Medications, other injections or transfusions during operation.		
30. Assist surgical team in case of patient's cardiac arrest:		
(a) Assist in passing instruments		
(b) Bring in, assemble equipment		
(c) Operate equipment		
(d) Draw up medications.		

Table No. 67 Results From Observations of Registered Nurses and Surgical Technicians in the Operating Room

	FUNCTIONS	R.N.	Surgical Technician
31.	Check or double check patient's chart upon his or her arrival to the Operating Room area to be sure lab work is done, his operative permit is signed, pre-operative medications have been given, and so on.	X	
32.	Book operations in conjunction with anesthesiology.		
33.	Schedule and assign personnel to scrub, to circulate, or to assist in Operating Rooms.	X	
34.	Inspect Operating Rooms and work rooms for order and cleanliness.	X	
35.	Orient and train new employees.	X	X
36.	Supervise and evaluate quality of the work done by Operating Room personnel.		
37.	Supervise maintenance of records.	X	
38.	Investigate and adjust complaints and problems.	X	
39.	Other functions.		
40.	Research.		
41.	Teaching.	X	
42.	Waiting for work.		

Table No. 68 Results From Observations of X-ray Technicians

FUNCTIONS	X-ray Technician
1. Cleaning and putting away equipment and supplies.	X[1]
2. Preparing and positioning patient on X-ray table.	X
3. Adjusting immobilization devices such as restraints or chest straps if necessary.	
4. Protecting the area not to be X-rayed with lead shield, as with children or pregnant women.	
5. (a) Check requisitions for good clinical history	
(b) Check developed films for markers, numbers, and dates.	X
6. Booking appointments.	
7. Answering phone calls, taking messages, notifying appropriate personnel.	X
8. (a) Locating and supplying physicians with X-ray examinations from files	X
(b) Putting up completed films for doctors to observe	X
(c) Filing X-ray examinations and records.	X
9. (a) Maintaining records of drugs, supplies, and equipment used, and X-rays taken	
(b) Going to Central Supply to get routine supplies, drugs, and equipment	
(c) Ordering drugs, supplies or equipment outside hospital	
(d) Checking for outdated supplies; returning them to Central Supply.	
10. Taking a routine X-ray, including: (a) Checking the patient's ID	X
(b) Measuring the size of the patient	X
(c) Centering the patient to the table, the film to the patient, and centering the tube on the area to be X-rayed	X
(d) Inserting the cassette into the Bucky	X

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1. An "X" means the observer saw this function being performed.

Table No. 68 Results From Observations of X-ray Technicians

FUNCTIONS	X-ray Technician
(e) Selecting a technique on the control panel (appropriate quantity, or milliamperage; length of exposure; penetration, or KV)	X
(f) Instructing patient through microphone to take and hold a deep breath	X
(g) Assisting patient in getting off table and into wheelchair, onto stretcher	X
(h) Labeling X-ray film, taking it to developer.	X
11. Developing X-ray films:	
(a) Inserting exposed film into processor	X
(b) Removing developed film	X
(c) Labeling, recording, or distributing film to appropriate persons	X
(d) Replenishing supply of film in filming drawer.	X
12. Go to the Operating Room to take an X-ray with a portable X-ray machine, using sterile technique.	X
13. Go to the floors to take X-ray with a portable X-ray machine.	X
14. Mixing and administering (under physician's directions) barium enemas or barium meal.	X
15. Assisting physician in fluoroscope examination:	
(a) Getting necessary equipment and supplies	X
(b) Adjusting cameras, table, television screens, patients, and overhead and side tubes	X
(c) Inserting appropriate film.	X
16. Assisting physician in special procedures (selective arteriograms, aortagrams):	
(a) Getting necessary equipment and supplies	X
(b) Adjusting cameras, table, television screens, overhead and side X-ray tubes, and the patient	
(c) Inserting appropriate X-ray film into magazine	
(d) Checking number of needles, catheters used, and so on.	
17. Teaching.	
18. Waiting For work.	X

Table No. 69 Results From Observations of Inhalation Therapy Technicians

FUNCTIONS	**Inhalation Therapy Technician**
1. Check oxygen cylinders, nitrous oxide bank, and nitrous oxide cylinders to make sure supply is adequate.	
2. Make rounds at 8 a.m. and 3 p.m.: a. Check warning lights in operating room, oxygen and nitrous oxide in delivery room, ambu bags and caryngoscopes on emergency carts, and permanent equipment in recovery room, emergency, and I.C.U.	X[1]
b. Pick up used equipment from floors.	X
c. Visit inhalant patients.	X
d. Make any necessary adjustments, repairs (if possible) on equipment.	X
e. Restock any supplies on floors.	X
3. Wash, sterilize, and put away used equipment.	X
4. Order, receive, and put away supplies.	
5. Examine patients' charts, record treatments given, and insert pulmonary lab function reports and pulmonary consultation sheets.	X
6. a. Record cost of materials and equipment used.	X
b. Make out patient charge slips for inhalants, equipment used, or treatments given.	

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[1] An "X" means that the observer saw this function being performed

Table No. 69 Results From Observations of Inhalation Therapy Technicians

FUNCTIONS	Inhalation Therapy Technician
7. a. Maintain a current Inhalation Therapy Kardex.	X
b. Maintain ongoing records of patients serviced, of charges made to patients, and of pulmonary function sheets.	X
8. Care for suction machines, including wall suction units, thoracic suction units: a. Check and clean b. Set up, attach c. Initially operate d. Repair if necessary.	
9. Care for oxygen mask, nasal cannula: a. Set up, attach, initially operate	X
b. Adjust or regulate flow of gases	X
c. Remove, dispose of, or clean.	X
10. Care for aerosols, administering both heated and cooled oxygen: a. Set up, attach, and initially operate	
b. Adjust or regulate flow and temperature of gases	X
c Remove and clean.	

Table No. 69 Results From Observations of Inhalation Therapy Technicians

FUNCTIONS	Inhalation Therapy Technician
11. Care for incubators: a. Check and clean b. Set up c. Repair if necessary.	
12. Care for croup tents in pediatrics: a. Check set up b. Repair if necessary.	
13. Care for ultrasonic nebulizers: a. Check and clean	X
b. Set up and initially operate	X
c. Adjust and regulate, including turning knobs or valves to regulate flow of gases	
d. Repair if necessary.	
14. Care for air mattress and hypothermia blanket: a. Check and clean	
b. Set up and initially operate	X

Table No. 69 Results From Observations of Inhalation Therapy Technicians

FUNCTIONS	Inhalation Therapy Technician
c. Adjust and regulate temperature and flow of gases	X
d. Repair if necessary.	
15. Care for Emerson volume ventilator: a. Check and clean	
b. Set up and initially operate	X
c. Adjust and regulate flow of gases, speed of ventilation, amount of ventilation	X
d. Repair if necessary.	
16. Care for Bird and Bennet respirators: a. Check and clean	X
b. Set up and initially operate	X
c. Adjust and regulate flow of gases	X
d. Repair if necessary.	
17. Administer gases other than oxygen, including: a. Compressed air	
b. Carbon dioxide.	
18. Informally instruct trainees, nurses, interns, and residents in the operation and care of equipment.	X

Table No. 69 Results From Observations of Inhalation Therapy Technicians

FUNCTIONS	**Inhalation Therapy Technician**
19. Discuss treatments with physicians; make recommendations.	
20. Administer medication via inhalation therapy equipment, including: a. Determine amount of medication necessary	X
b. Draw up medication.	X
21. Run blood gases on patients to determine PO_2, PCO_2, PH, HCO_3 and so on.	
22. Assist physician in doing a lung profile, including measuring air capacity, flow rates, and so on.	
23. Assist physician or nurse in resuscitation of a patient.	X
24. Other functions.	
25. Supervisory.	X
26. Teaching.	X

Table No. 70 Results From Observation of Laboratory Technicians

FUNCTIONS	LABORATORY TECHNICIAN
I. GENERAL	
a. Gather supplies, instruments and equipment in preparation for tests.	X
b. Clean and put away equipment and supplies after use.	X
c. Care for and maintain equipment.	X
d. Check stock levels.	X
e. Order and put away supplies, equipment and biological items.	X
f. Record and report tests.	X
g. Prepare standards and reagents.	X
h. Draw blood (excluding blood bank):	
1. From out-patients	
2. Morning: daily orders	X
3. Afternoon: pre-operative.	
i. Other.	
IX. Teaching.	X
X. Research.	
XI. Supervisory duties.	X
II. BACTERIOLOGY (Includes mycology and serology)	
a. Receive and process routine cultures.	X
b. Antibiotic sensitivity test.	X
c. Antibiotic blood level.	
d. Prepare and stain smears.	X
e. Colony count.	X
f. "C" reactive protein tests.	
g. Complement fixation test.	
h. (1) Infectious mononucleosis heterophile and monospot (2) Heterophile presumptive and differential antibody test.	

Table No. 70 Results From Observation of Laboratory Technicians

FUNCTIONS	LABORATORY TECHNICIAN
II. BACTERIOLOGY (continued)	
i. Febrile agglutinin.	
j. Rheumatoid arthritis test.	
k. Strep MG test.	
l. Antistreptolysin "O" titre.	
m. Pregnancy test.	X
n. Sperm count.	
o. Prepare culture media.	X
p. Cultivate mycology specimens and examine mycology specimens microscopically.	X
q. Other: Parasitology.	X
IV. CHEMISTRY	
1. Cephalin Flocculation.	X
2. Ph Urine.	
3. Protein, Total.	
4. Protein, Qualitative Urine.	
5. Specific Gravity.	
6. Albumin: Qualitative Quantitative.	
7. Albumin and Globulin.	
8. BSP (Bromosulphalein).	
9. B.U.N. (Urea Nitrogen).	X
10. Calcium: Qualitative Urine Quantitative	
11. Chloride.	X
12. Gastric contents.	X
13. Hemoglobin, Plasma.	

Table No. 70 Results From Observation of Laboratory Technicians

FUNCTIONS	LABORATORY TECHNICIAN
IV. CHEMISTRY (continued)	
14. Occult Blood.	
15. Thymol Turbidity.	
16. Amylase.	X
17. Bilirubin.	X
18. Carbon dioxide.	X
19. Gastric Analysis, Diagnex.	
20. Glucose: Serum and CSF Urine Qualitative Glucose Tolerance Test (3 hours) Glucose Tolerance Test (longer than 3 hours).	
21. Ph Blood.	
22. Phosphatose, Acid.	
23. Potassium.	
24. Protein CSF.	X
25. Salicylates.	
26. Sodium.	X
27. Urea Clearance.	
28. Uric Acid.	
29. Urobilinogen.	
30. Spinal Fluid, Complete Examination.	
31. Osmolarity.	
32. Cholesterol.	
33. Cholesterol Total and Esters.	
34. Colloidal Gold.	
35. Creatine.	X
36. PCO_2 and PO_2.	
37. Phosphatase, Alkaline.	X
38. Platelet Antibody.	
39. Transaminase (SGO-T).	
40. Transaminase (SGP-T).	

Table No. 70 Results From Observation of Laboratory Technicians

FUNCTIONS	LABORATORY TECHNICIAN
IV. CHEMISTRY (continued)	
41. Creatinine Clearance.	X
42. Red Cell Survival.	
43. Schilling Test.	
44. Other.	
VI. HEMATOLOGY	
a. Stain blood smears:	
(1) by hand	
(2) using automatic staining machine.	X
b. Identify:	
(1) immature blood cells	X
(2) morphological variations of blood cells.	X
c. Bleeding and clotting tests:	
(1) capillary fragility tests	
(2) clot retraction	
(3) prothrombin time and prothrombin consumption tests	X
(4) thromboplastin generation	
(5) fibrinogen estimation	
(6) partial thromboplastin.	
d. Erythrocytes (red blood cells):	
(1) hematocrit	X
(2) erythrocyte fragility	
(3) erythrocyte sedimentation rate	
(4) erythrocyte indices.	X
e. Blood cell counts:	
(1) red blood cell count	X
(2) white blood cell count	X
(3) differential leukocyte count	X
(4) platelet count	X
(5) eosinophil count.	X
f. Sickle cell preparation.	
g. Spinal fluid cell count and differential.	
h. Spinal fluid hematocrit.	
i. L. E. preparation.	
j. Leukocyte alkaline phosphatase.	
k. Other.	

Table No. 70 Results From Observation of Laboratory Technicians

FUNCTIONS	LABORATORY TECHNICIAN
VII. HISTOLOGY	
a. Prepare specimens for processing.	X
b. Embed tissue in paraffin.	X
c. Section tissue in microscopic blocks.	X
d. Prepare stains:	
(1) routine	X
(2) special.	X
e. Stain specimens.	X
f. Mount stained specimens.	X
g. Prepare frozen sections.	X
h. Assist in bone marrow examination.	
i. Assist pathologist at autopsy.	
j. Decalcify specimens of bone and teeth.	
k. Other.	